

2.005.03 Field Trip Request Form – MSSD

(Submit to the Principal's Office at **LEAST** 3 weeks in advance)

Today's Date: _____ Department: _____

Field Trip Leader(s): _____

Destination(s): _____

Date of Trip: _____ Departure Time: _____ Return Time: _____

Number of Students: _____ Number of Adults: _____

Names of Adults: _____

Mode of transportation (bus, walk, etc): _____

Plan for supervision:

Purpose of the trip/how it supports the curriculum:

Trip plan (what will the group be doing?):

Description of the required student activity (reflection form, worksheet, letter, etc):

Field Trip Leader Signature: _____

Date: _____

Lead Teacher Signature: _____

Date: _____

Approved: _____

Not Approved: _____

Reason:

Principal's Signature: _____

Date: _____