

# Atkinson County School System

## Field Trip Request Form

Name of School: \_\_\_\_\_

Date of Request: \_\_\_\_\_ Date of Trip: \_\_\_\_\_ Teacher: \_\_\_\_\_

Grade Subject: \_\_\_\_\_ Departing Time: \_\_\_\_\_ Return Time: \_\_\_\_\_

Destination: \_\_\_\_\_

# of Students: \_\_\_\_\_ # of Adults: \_\_\_\_\_ # of Buses \_\_\_\_\_

Driver(s) Needed: \_\_\_\_\_ Yes \_\_\_\_\_ No

Finances to be provided by: \_\_\_\_\_

Objective: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Approved \_\_\_\_\_ Not Approved \_\_\_\_\_ Reason \_\_\_\_\_

Principal's Signature: \_\_\_\_\_

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### This section is to be filled in by Transportation Department.

Bus Available \_\_\_\_\_ Bus Unavailable \_\_\_\_\_

Director's Signature \_\_\_\_\_ Date \_\_\_\_\_

Approved \_\_\_\_\_ Not Approved \_\_\_\_\_ Reason \_\_\_\_\_

Superintendent's Signature: \_\_\_\_\_ Date \_\_\_\_\_

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### Field Trip Check List

\_\_\_\_\_ Notification of Transportation Director and confirmation of trip

\_\_\_\_\_ Permission Slips Signed

\_\_\_\_\_ Chaperones Arranged (must be older than 21 yrs of age)

\_\_\_\_\_ Bus and Drivers Arranged