

SOUTH NEWTON SCHOOL CORPORATION
Kentland, Indiana 47951
REQUEST FOR FIELD TRIP AND/OR TRANSPORTATION

When completed please route as follows for approval
Principal of the requested building; Athletic Director; Transportation Director; Superintendent of Schools

School: _____ Date of Request: _____

Nature of Trip (E.G. Track, Band Contest, Etc.): _____

Date of Trip: _____

Starting Time of First Activity or Event: _____

List the specific educational objective(s) this trip will facilitate the attainment of: _____

List the Course or Subject area that this trip is a part of: _____

Identify the unique educational opportunity that this trip will provide for the students involved: _____

Explain why this trip cannot reasonably occur without interrupting the school day: _____

List the number of buses requested: _____

Estimated Time of Departure: _____ Loading Site: _____

Estimated Time of Return: _____ Drop-off Site: _____

Destination: _____ City: _____

Approximate number of students involved: _____

Number of sponsors or adult chaperones on each bus: _____

Name(s) of sponsor or chaperones: _____

Certified person in charge of group: _____

Minutes of Instructional time lost: _____

Signature of Teacher/Sponsor: _____

Signature of Principal: _____

Signature of Athletic Director: _____ Date Received: _____

Transportation Director: Approved _____ Not Approved _____

Bus Driver Assignment: _____

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Superintendent's Signature: _____

Approved: _____ Not Approved: _____ Board Approval Date: _____

PLEASE NOTE: Revised 9/4/1987, as per requirements of the Administrative Rules of the State Board of Education, section 1.511 IAC 6-2-1.1 All field trip requests that require Board approval must be submitted and approved before taking the trip.