FIELD TRIP REQUEST FORM

GLASCOCK COUNTY CONSOLIDATED SCHOOL

1. Where:
2. When:
3. Time Leaving:
4. Time Returning:
5. Type of Transportation (circle one): School Bus Charter #:

\*Charter Bus Company \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Estimated Cost:
2. How will cost be handled:
3. All students have insurance: \_\_\_\_\_NO \_\_\_\_YES
4. State the educational value for the students:

10.How will the trip be integrated into the curriculum, both before and afterwards?

11.List potential hazards and safeguards:

Hazards: Safeguards:

1. List number of chaperones and their names:
2. List the number and names of students participating (Use back of form):
3. Turn in the Parental Permission form for field trip for each child listed above once field trip is approved (signatures below).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TEACHER SUPERINTENDENT

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PRINCIPAL

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_