

Loudonville-Perrysville E.V.S.

Field Trip Request Form

Date: _____

Grade/Class/Group: _____ No. of Students _____

No. of Adults _____

Destination: _____

Stop for Eating? _____ UwdukwglEqxgtci g'P ggf gf Aaaaaaaaaaaaaaaaaaaaaaa

Purpose - Explain how this trip will foster improved student performance on high stakes standardized tests such as Proficiency or OGT: _____

Funded By: _____

Date of Trip: _____ Does the driver stay for the activity? _____

(On long activities within 60 miles, the driver should return)

Departure Time & Place: _____

Expected Return Time: _____

Number of Buses Desired: _____

(Bus seating capacity is based on 3 per seat; do you want 2 or 3 per seat?)

If not using a bus, specify form of transportation: _____

*Name of Chaperone (s) _____

Requested by: _____

Parent Permission Slip for Each Child? _____

Approved By: _____

Date: _____

Principal

Date: _____

Superintendent

In order to be approved, request forms should be in the hands of the Principal at least 10 days prior to the scheduled date of the trip. Trips must be related to instruction.

Include map or directions to destination.

- Must be on file in Superintendent's Office before date of trip.

Cc: Ugetgvt {

*****Cafeteria

Special Areas during the day of the trip

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