REQUEST FOR APPROVAL OF FIELD TRIP

Submit two weeks PRIOR to date requested

Teacher:		Subject:
Grade(s):	Number of Pupils:	Number of Chaperones:
Names of teachers/staff goil	ng:	
Date of field trip:		
Destination:		
Purpose of trip:		
		eo Camera, etc.)
(Please "publicize" your field	d trips)	
	nitted to the 5-12 Office a an eligibility form turned	and Activities Director in to the Activities Director PRIOR to going on field trip)
Type of Transportation:		
Private Car		
Chartered Bus	Name of Company _	
School Bus		
Time of Departure:		Time of Return:
How trip is to be financed: _		Cost per pupil:
Classes for which a substitu	ite is needed:	
Provisions made for student	ts not accompanying you	u on the trip:
Will students miss lunch at t	the school? Y or N	
	SIGNATURE A	AND APPROVAL:
Teacher		Date:
Principal		Date:
Transportation Arranged?	Date:	By Whom?

FIELD TRIP PERMISSION SLIP: BENSON JUNIOR/SENIOR HIGH SCHOOL

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					on					, 200_	in (connect	ion
with wo	ork in	the					clas	ss. I und	erstan	d that t	he field	trip will	be
made	in	accordance	with	school	rules,	that	the	method	of	transp	ortation	will	be
			, that	the stude	ent will b	e unde	er the s	upervisior	of te	achers a	and/or pa	arents, a	and
that the	e cos	t of the field tr	ip will b	e			It is	s also und	lersto	od that t	he stude	ent has	the
respon	sibilit	y to arrange w	vith teac	hers of th	ne classe	es he/s	he will	miss to m	nake u	p any c	lass proj	ect, not	es,
assigni	ments	s, test, or previ	ously so	cheduled	work.								
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						_		Signature	of Par	ent or G	uardian		
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Signature of Parent or Guardian