

**EXTENDED FIELD TRIP
PERMISSION FORM**

1. Description of trip and destination:

2. Departure: Date _____ Time _____

3. Return: Date _____ Time _____

Grades Included: _____

4. Educational objectives to be accomplished and any follow-up to be done after the field trip.

a) _____

b) _____

c) _____

5. Teacher in charge: _____

6. Names of all supervisors: _____

7. Name of students and Grade Level: (Please attach complete list)

8. Basis for selection of class or students (If not applicable – N/A)

9. Transportation details: _____

10. Overnight accommodations (Provide name, address, telephone # of each location):

11. Cost estimates and source of funds (please include explanation for supporting students with financial difficulties):

12. Safety and emergency preparation: _____

13. Additional medical / accidental insurance provisions: _____

14. Other pertinent, valuable information: _____

Approved by:

Principal

Board / Superintendent

Date

Date