

# Rocky Hill Public Schools

## Field Trip Request

To be completed at least three (3) weeks prior to date of the trip, if within the state and four (4) weeks ahead if trip is out of state. Also complete the Request for Use of Facility form to place the event on the school calendar.

School: \_\_\_\_\_ Date of Trip: \_\_\_\_\_ Number of Students Involved: \_\_\_\_\_

School Departure Time: \_\_\_\_\_ School Arrival Time: \_\_\_\_\_ Teacher in Charge: \_\_\_\_\_

Place(s) Visited: \_\_\_\_\_

Date of Request: \_\_\_\_\_

Mode of Transportation(*check as appropriate*): \_\_\_\_\_ Double A Bus/Van(s) \_\_\_\_\_ Private Bus Company

Name/Description Student Group Involved: \_\_\_\_\_

Additional Adult Chaperones: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Connection to Curriculum: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Method of Coverage for Classes (*if necessary*): \_\_\_\_\_

Communication of Trip Particulars via (*check as appropriate*): \_\_\_\_\_ Parent Letter \_\_\_\_\_ Parent Meeting

\_\_\_\_\_ Comprehensive Description Packet \_\_\_\_\_ Other (explain): \_\_\_\_\_

Name of Program/PPBS Code in Budget: \_\_\_\_\_

Number of Buses: \_\_\_\_\_ @ \_\_\_\_\_ per bus = \_\_\_\_\_

Cost per Student: \_\_\_\_\_ Payment \_\_\_\_\_ Paid by Student \_\_\_\_\_ Paid by BOE Funds \_\_\_\_\_

Other \_\_\_\_\_ Additional Cost paid by Student (*if necessary*): \_\_\_\_\_

**PARENTAL PERMISSION FORMS ARE REQUIRED FOR ALL TRIPS. ONLY BUS TRANSPORTATION OR PARENT-DRIVEN CARS MAY BE UTILIZED, AND THE OWNER ASSUMES RESPONSIBILITY UNDER CURRENT POLICY.**

Principal's APPROVAL \_\_\_\_\_ DENIAL \_\_\_\_\_

Principal's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Superintendent's APPROVAL \_\_\_\_\_ DENIAL \_\_\_\_\_

Superintendent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Date to be placed on BOE Agenda: \_\_\_\_\_