**Fayette R-III School District**

**Field Trip Request Form**

**Teacher**: Click here to enter text. **Class or Club**:Click here to enter text.

**Date of Request**:Click here to enter a date. **Date of Trip**: Click here to enter a date.

**Destination**: Click here to enter text.

**Location Name**: Click here to enter text.

**Address**: Click here to enter text.

**City**:Click here to enter text. **State**: Click here to enter text.

**Bus Needed**: [ ] Yes [ ] No [ ]  Will need in inclement weather

**Lunches Needed**: [ ] Yes [ ] No **Substitute Needed:** [ ] Yes [ ] No

**Departure Time**:Click here to enter text. **Return Time**: Click here to enter text.

**Number of Students**:Click here to enter text. **Number of Adults**: Click here to enter text.

Please note: Drivers must be informed that the school district does not provide car insurance and drivers are to transport only the total number of passengers designated by their car size (such as a 4-passenger vehicle).

**Explain any other arrangements you have made with other teachers, such as switching lunch shifts, duties, etc.**

Click here to enter text.

**Objectives for the trip**: Click here to enter text.

**Activities during the trip**: Click here to enter text.

**Follow up will consist of**: Click here to enter text.

**Approvals**

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

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

Bus Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- |
| ***Bus Driver Section Only***Driver Name: |
| Departure Time |  | Beginning Miles |  |
| Return Time |  | Ending Miles |  |
| Total Drive Time |  | Total Miles |  |