



NON-OVERNIGHT FIELD TRIP REQUEST FORM

Organization / Grade Level	Campus	Faculty Sponsor's Name

Departure Date	Departure Time	Return Date	Return Time	# of Students	# of Adults

Campus attendees:

Trip Destination	Day to be missed
	<input type="checkbox"/> Instructional Day <input type="checkbox"/> Weekend

Identified TEKS:

***Briefly identify and describe the curriculum connection, TEKS and purpose of trip.

Check one of the field trips below:
<input type="checkbox"/> Local Field Trip (form due 21 days in advance)
<input type="checkbox"/> Extended Non-Overnight Field Trip (form due 21 months in advance)

Required approvals:	
_____	_____
Sponsor (signature)	Date
_____	_____
Principal (signature)	Date
_____	_____
Director/Coordinator (signature)	Date
_____	_____
Area Executive Director (signature)	Date

School Policy Requirements:	
<input type="checkbox"/> Rules & consequence (contract) unsigned copy \$ _____ Estimated cost of trip \$ _____ Estimated cost per student \$ _____ Funds on hand as of today \$ _____ Funds yet to be raised _____ Budget or activity fund number	<input type="checkbox"/> Detailed itinerary attached <input type="checkbox"/> List of participants (chaperones & students) <input type="checkbox"/> Detailed financial information attached (fundraising, transportation, meals, etc.) <input type="checkbox"/> Permission forms signed & returned to campus (chaperones & students) <input type="checkbox"/> Sponsor has read Administrative Guidelines (those that pertain to field trip procedures)

