

F9EI 9GH: CF': 9 @ HF-D

Date _____ Teacher Requesting Trip _____

Organization or Class _____

Date of Designated Trip _____ Number of Students _____

Destination _____

Departure Time _____ Return Time _____ (X:XX AM or PM)

Periods Needing a Substitute _____ Charge Substitute To _____

Transportation Required Bus Suburban Car Other _____

Cost of Transportation _____ miles @ _____ per mile = \$ 0.00

Charge Transportation Cost To _____

Student Goals and Objectives of Trip

Department Chairperson Approval _____

Principal's Approval _____

Evaluation of Trip

ROUTING

Requestor
(completed form)
to
Dept. Chair
(pre-approval)
to
Principal
(final approval)
to
Prin's Secty
(filing)
return to
Requestor
(trip evaluation)
return to
Prin's Secty
(final filing)