



Clinton County Schools



School-Related Student Trip Request Form

All trips must have prior Board approval.

School _____ Faculty Member(s) Sponsoring Trip _____

Type of Trip (Check One):

- Classroom Field Trip Class (i.e., junior, senior) Trip (Specify) _____
- Organization / Club Trip (Specify) _____
- Other (athletic, band, if applicable) _____

Destination _____

Address _____ Phone _____

- Out of State Out of County Within County
- Overnight (Give name, address, & phone of lodging) _____

Date(s) of Trip _____ **Departure Time** _____ **Return Time** _____

Purpose / Educational Value _____

Itinerary (list in detail all activities & locations during the trip) _____

Source of Funding for Trip _____

Bill Trip Expenses to:

- Sponsoring Organization School Council Board Other (Specify) _____

Supervision (Attach list of names of adults accompanying students on trip.)

Number of: Students _____ Faculty Sponsors _____ Other Chaperones _____

Total # of participants _____

Have all chaperones undergone the required records check and been designated by the principal / designee to supervise students? Yes No

Mode of Transportation: Is district transportation needed? Yes (*Submit Bus Voucher*) No

Signature of Program Supervisor / Principal _____

Date _____