

**ALLEN PARK PUBLIC SCHOOLS  
Field Trip/Bus Request Form**

**Building:** Arno Bennie Lindemann Middle School High School Community School

**Date of Request:** \_\_\_\_\_ **PLEASE SUBMIT AT LEAST 2 WEEKS PRIOR TO TRIP**

**FIELD TRIP DESTINATION:** *(Please attach/include map/directions if using District transportation)*

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**Date of Trip:** \_\_\_\_\_ **Return Date from Trip:** \_\_\_\_\_

**Time of Departure:** \_\_\_\_\_ **Pick Up Door/Location:** \_\_\_\_\_  
*(District Bus Available After 8:30 am)*

**Leave Time from Destination:** \_\_\_\_\_ **Return Time to School:** \_\_\_\_\_  
*(District Bus Must Return by 2:00 p.m. unless special accommodations have been made with Transp. Dept.)*

**Sponsoring Teacher(s):** \_\_\_\_\_

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**Grade:** \_\_\_\_\_ **# of Students:** \_\_\_\_\_ **# of Chaperones:** \_\_\_\_\_ **# of Buses:** \_\_\_\_\_  
*(Maximum is 70 per bus)*

**List any special instructions (more than one destination, special needs students, equipment):**

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School Day Overnight Out of State Out of Country  
*Out of state/country or overnight trips require Board approval. If overnight, please indicate lodging and attach itinerary if applicable.*

**FIELD TRIP RATIONALE**

Purpose/Rationale/Educational Objective:

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Follow Up Instruction:

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**METHOD OF TRANSPORTATION**

District bus(es) has been reserved – Marleen Nowland #1602 (\$40 Per Hour/Per Bus)

- ✓ Date of Transportation Department Contact: \_\_\_\_\_
- ✓ NOTE: *Limited* District buses are available during the last week of school in June
- ✓ June APMS Physical Education Final Exam/Bowling Trip Approved

Private Carrier will be used

Private Vehicle (Permission form required)

Other: \_\_\_\_\_

**FIELD TRIP EXPENSES**

Is a substitute teacher(s) required?  YES  NO

- ✓ \$106 per full day must be calculated in to overall cost of field trip for each sub needed: # \_\_\_\_\_

FULL DAY SUB  AM ONLY  PM ONLY

- ✓ Enter request for substitute teacher into AESOP

Funded by Grant or PTA/PTSA

Student Paid - Cost per student \$ \_\_\_\_\_

Debiting Activity Account for Sub Costs: \_\_\_\_\_

Debiting Activity Account for District Bus Costs: \_\_\_\_\_

Approval \_\_\_\_\_ Principal/Director Date: \_\_\_\_\_

**Please forward approved copy to Marleen Nowland if District transportation requested.**

**Additional Information**