Glynn County Schools
Field Trip/School-Sponsored Activity Request Form

All field trip and school-sponsored activity requests must be made using this form. Requests made by any other means will not be considered.

Field trip requests must be submitted online for approval at least ten days prior to the departure date. Parental permission forms must be on file prior to any trip. Parents should be provided with emergency phone numbers and any other pertinent information. Adult chaperones (1:10 Elementary; 1:15 Middle; and 1:20 High School) must supervise the trip at all times. All trips must be self-supporting and no student will be denied permission to attend for failure to contribute.

Superintendent approval is required on all trips out of state or those extending overnight.

Part A

(There must be something entered in every field of the travel tracker request form. Please enter N/A if nothing applies in those spaces.)

School ___________________________________________ Principal/Dept Head: ___________________________

Vehicle P/U Date: ____/_____/_____ Time____:____        Arrive at Venue: ____/_____/_____ Time____:____

Depart Venue: ____/_____/_____ Time____:____        Vehicle Return: ____/_____/_____ Time____:____

Pickup location: ___________________________________________________________________________

Stops on the way: ___________________________________ Stops on return: _____________________________

Destination: _________________________________________

Staff Requesting Trip: ___________________________________ Cell #:__________________________

Emergency Contact: ___________________________________ Cell #:__________________________

Name of Club/Group/Activity: ___________________________ Donations from Students: $________________

Need Sp Ed Bus? ___Yes ___No  Number of: ___ Students ___ Staff ___ Parents ___ W/Chair ___ C/Seat

Grade Level: (Circle)     All PreK  K  1  2  3  4  5  6  7  8  9  10  11  12

Students be away from school during lunch? Yes ____ No ____ If so, are bagged lunches needed? Yes ____ No ____ How Many? ________

Special Request: _________________________________________________________________

Transportation Mode: ____School Bus _____Private Car ____Other If other, ___________________________ Number of Buses: ________

Part B

Purpose/Objective: _________________________________________________________________

Do you have students with concerns on this trip? Yes ____ No ____ If so, please list student name and concern:

Student______________________________________________  Concern_____________________________________

List Staff Responsible During Trip:

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<tr>
<th>Staff Pin</th>
<th>Name</th>
<th>Sub Required (Y/N)</th>
<th>Chaperone(s) Name</th>
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