

Date Submitted: \_\_\_\_\_

**Athletic/Competition Trip Request and Purchase Authorization**

Activity \_\_\_\_\_ Driver Requested: \_\_\_\_\_

Date \_\_\_\_\_ Depart: \_\_\_\_\_ School: (Requesting Trip) \_\_\_\_\_

Date \_\_\_\_\_ Return: \_\_\_\_\_

Overnight: Y or N (Circle One) Number of Students: \_\_\_\_\_

Number of Teachers/Coaches: \_\_\_\_\_

Undercarriage Storage Required: Y or N (Circle One) Number of Busses: \_\_\_\_\_ Sp Ed Bus \_\_\_\_\_

**Description of Trip** MAX. BUS CAPACITY 56 High School - 62 Middle School – 76 Elementary

A. Destination: \_\_\_\_\_

Address: \_\_\_\_\_

**B. Cost and Funding**

Approximate cost per student: (Mileage & Driver fee is per bus) Total Est Cost and Funding Source(s):

Transportation \_\_\_\_\_ \$1.00 per mile + driver fee Account Code: \_\_\_\_\_ Amount \_\_\_\_\_

Food \_\_\_\_\_ (\$68.07, \$85.09, or \$102.11) Account Code: \_\_\_\_\_ Amount \_\_\_\_\_

Total Cost \_\_\_\_\_ Total Trip Cost: \_\_\_\_\_ If all funds are not avail-

able at the time of the trip, the trip will not occur or will be funded with Account # \_\_\_\_\_ Initials: \_\_\_\_\_

C. Itinerary: Please put complete itinerary on the back of this form.

D. All teachers/coaches must attach **MapQuest** type directions to the request – Any deviations from MapQuest route must be indicated in writing. The driver may need to find alternative if road is not sound.

E. On every trip the sponsoring teacher(s) are required to have a copy of every **student’s and chaperones emergency information that is attending the trip with them during field trip.**

F. Include names of all **adults** going on trip on your **Student Roster.**

- o \*Mark here and list any students that require **Health Services** to be performed by Nurse.

G. Any student not returning to school on school transportation must have prior written approval kept on file.

\_\_\_\_\_  
Requesting Coach/Sponsor/s Name Date Approved by Transportation Director Date

\_\_\_\_\_  
Athletic Director Date Approved by Health Svcs Supervisor Date

\_\_\_\_\_  
Approved by Principal Date Approved by Finance Date

\_\_\_\_\_  
Approved by Director of Schools Date

\* No trip will be planned during the last two weeks of a school semester.

\*\*When a sponsor’s or parent’s car is used for an extra curricular trip, it is understood; that in case of an accident, the driver’s insurance is primary and county insurance is secondary.

\*\*\*Trips that will result in students missing one day of school **must get Board approval** prior to the time of the trip.

\*\*\*\* **Field trip form must be turned in to BOE at least 1 month prior to the field trip for completion of form, approval and driver assignment.** Requests should be submitted as soon as planning begins or as soon as possible.

Assigned to Bus/Driver: \_\_\_\_\_

Revised 07-1-2014

*Plan your trip around the regular bus schedules. All drivers are needed on afternoon routes until at least 3:35*