



MVHS Activities/Facilities/Field Trip Request Form

Electronic form instructions: Start typing your first response. Use TAB key to move to next field. **Instructions:** Complete Part A, B and C. The completed form needs to be printed and taken to appropriate personnel for signatures. Attach club meeting minutes approving event, along with any necessary paperwork. **Return signed forms to ASB or Becky Clark.** This form must be submitted at least **2 wks prior to event date (4 weeks** if you require transportation). Please be aware that Field trips on Fridays, prior to holidays, and during May may not be approved.

PART A:

- 1. Today's Date: _____ Date(s) of Event: _____
- 2. Time of Activity: From _____ To: _____
Or periods 0 1 2 3 4 5 6 After School
- 6. Any conflicting events for this date/time/space? (call Becky Clark or check the school calendar) yes no
- 3. Name of Organization/Club: _____ Advisor/Requestor: _____
- 4. Room(s)/Area Requested: _____
- 5. Indicate any special setup required (podium, microphone, chairs, tables, lcd projectors, etc.): _____

PART B (Event Info)

- 1. Type of Event: Activity *Fundraiser (any event with money collection) **Field Trip
- 2. Event Title & Description: _____
- 3. Location/Destination (field trips only): _____
Address (field trips only): _____
- 3. How Many Adult Chaperones (Check with Activities Director for number of chaperones required): _____
**Fundraisers and ANY event where money will be collected must have all financial paperwork attached or your request will not be approved. (Revenue Potential, PO request, Invoices, Meeting Minutes, etc.)*
***Field trips-* The district states that the trip originator must notify the health office at least 2 weeks in advance of a trip. In these cases, we recommend that teachers provide a list of all possible students who may attend a trip so the health office can research life threatening allergies like peanut butter and bee stings and ensure there are staff on the trip that can administer proper medications to those students, students with disabilities, and students with a medical need. If a student is in a wheelchair, the school must order a bus that has wheelchair access.
Health Office Requirement. I understand the requirement and will contact the health office with a list of students at least 2 weeks prior to the trip. _____ Advisor initials

PART C (Field Trip Transportation)

- 1. Leave school (date & time) _____ Return to school _____
- 2. Method of transportation: School Bus Charter Bus Van Walking Other: _____
- 3. Number of vehicle(s) requested: _____ 4. Charge to: _____

PART D (Use of School Facility)

Use of gym and fields requires athletic director's signature. Use of MPR requires the performing arts chair approval. Use of library requires librarian's approval.

Athletic Director (Gym/field Use) _____ Date: _____
 Perf. Arts Chair (MPR Use) _____ Date: _____
 Librarian: (Library Use) _____ Date: _____

PART E: (Administrative Approval)

- 1. Advisor: _____ Approved Disapproved Date: _____
Comments: _____
- 2. Bookkeeper: _____ Approved Disapproved Date: _____
Comments: _____
- 3. Activities Director (ASB): _____ Approved Disapproved Date rec. in minutes: _____
Comments: _____
- 4. Administrator: _____ Approved Disapproved Date: _____
Comments: _____

Input in calendar by Becky Clark _____ on date: _____