

2017 WEST CLARK COMMUNITY SCHOOLS

FIELD TRIP REQUEST for

[Empty space for school name]

Section A

School Name

COMPLETE ALL HIGHLIGHTED AREAS: All trip requests must be pre-approved by building Principal. Overnight OR out of state trips must be pre-approved by the Superintendent & School Board. *The teacher/sponsor in charge must contact the Transportation Director to schedule buses PRIOR to submitting this request.*

Date(s) of Trip:

Out of State? YES NO

Teacher/Sponsor in charge:

Overnight? YES NO

Cell Phone number:

Class/Grade/Club requesting field trip:

Where are you going? (Name & city/state):

Number of vehicles needed: School Bus White Activity Bus Coach Other

EXCEL TIP: Text in this worksheet will automatically wrap within a cell at the end of the line. In multi-line cells, to start a new line of text at a specific point, click where you want to break the line, and then press ALT +ENTER. REV 10/15

Section B

Section C

ACTIVITY BUS DRIVER(S) ONLY

Cert Driver

Name of Driver:

DEPARTURE TIME:

Name of Driver:

RETURN TIME:

Name of Driver:

Total hours + 30 minutes (pre/post trip)

Section D

Total Cost per student:

Estimated Bus Cost: \$ -

Other costs:

Total Cost **\$0.00**

Section E

How will fieldtrip be paid for? (i.e. Grant, PTO, student pay, etc.)

Description of fieldtrip activity:

Goals & objectives of fieldtrip:

X in box to verify activity is part of goals/objectives of an approved course or curriculum. YES

Submitted by:

Date:

(CHECK SECTION "C" FOR TOTAL HOURS) SIGNATURE

Principal:

Superintendent:

Coach/Sponsor:

[Empty space for signature]

(BOX "B" MUST BE FILLED IN - DEPARTURE TIME) SIGNATURE

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FIELD TRIP TIME SHEET

DT: Drive Time
LT: Layover Time

DT LT

1. DRIVER NAME:		DRIVER SIGNATURE			
2. DRIVER NAME:		DRIVER SIGNATURE			
3. DRIVER NAME:		DRIVER SIGNATURE			
4. DRIVER NAME:		DRIVER SIGNATURE			
5. DRIVER NAME:		DRIVER SIGNATURE			
6. DRIVER NAME:		DRIVER SIGNATURE			

*Sponsor signature must be present to authorize driver pay:

OFFICE TOTALS:		
USE ONLY:		

BUS BEGINNING MILAGE:

BUS ENDING MILAGE:

Milage and Trip Times to be filled out by
Coach/Sponsor on trip day.

TRIP LEAVE TIME	<input type="text"/>	Destination Arrival:	<input type="text"/>
Destinatin Leave:	<input type="text"/>	Restaurant Arrival:	<input type="text"/>
Restaurant Leave:	<input type="text"/>	Return to School:	<input type="text"/>

Directions:

- Fill out the front page completely. ALL 5 SECTIONS.
- Your building principal must sign the bottom of the front page.
- Submit form to the Superintendent's office for approval.
- Once approved, office staff will complete a portion of the back side of the sheet.
- You will then receive an email conformation of the appoval, along with the driver's names.
- The day of your trip ask one (1) driver for bus milage prior to leaving on the trip.
- Document the times that you leave school, arrive at your destination(s), and return to school.
If the trip has been planned durning a school day, you must return no later than 2:00pm.
- Ask driver(s) for their signature(s) and the final milage.
- Coach/Sponsor must sign under driver's names to authorize driver pay.
- Have driver return document to the Superintendent's office for final processing.
- Pay trip invoice when it arrives.

For Office Use Only:

Final Approval			
Driver's Hours		Driver Time:	
Milage amount		Layover Time:	
Billing amount		Total Trip Time:	