

Otsego Public Schools Field Trip Request Form

Please complete the following form any time you are planning a field trip or special activity involving students leaving school grounds. This form must be turned into the office as soon as possible. This form must also be on file in the office prior to leaving the building.

Teacher:		Grade:
Destination:		
(Overnight and o	out-of-state trips must have Boa	ard approval – Please attach detailed information)
Number of Students:	Number of Staff:	Number of Chaperones:
How will this trip be funded?		
Purpose of trip: (subject area c	overed/course of study – includ	le itinerary/attachments)

-	transportation red	-
-	Other – <i>specify</i>	
Date/time leaving (from schoo	l): Date	e/time returning (to school):
Cost Total Cost: \$ (Please be certain to turn all m	oney in to the office as it is rece	Total Student Cost: \$eived.)
ADDITIONAL INFORMATION	ON: (Special Instructions – dres	ss code, lunch instructions, spending money, etc.):
Principal's Signature		Date
********	**********	*************
OVE	RNIGHT/OUT-OF-STATE F	IELD TRIP APPROVAL
1	Education approval required for ndent's office for further process	all out-of-state and overnight trips. Forward ssing.
Superintendent's Signature		Date.