



ITAWAMBA COUNTY SCHOOL DISTRICT

Field Trip Request Form

School: _____

Group / Grade(s) Attending: _____

Date of Field Trip: _____ Time Leaving: _____ Time Returning: _____

Number of Students: _____ Name of Bus Driver: _____

Destination (include city/state): _____

Staff Member Submitting Request: _____

Chaperones: _____

Funds Will be derived from: _____

Educational Purpose of Field Trip:

- Name of all students, teachers, and chaperones must be submitted to the office and confirmed again on the day of the trip.
- Sack lunches for students missing a lunch period must be requested to the cafeteria manager at least one week before the trip.
- Bus requisition must be completed to request bus once this form is approved.
- Permission slips must be signed by a parent/guardian, which list emergency numbers and any medical conditions.

Approved Not Approved

Principal / Director Signature

Approved Not Approved

Superintendent Signature