

# Lukachukai Community School Activity Request

**ACTIVITY AND STUDENT AND CHAPERON INFORMATION**

Day: \_\_\_\_\_ Date: \_\_\_\_\_ Time leaving: \_\_\_\_\_  
 Time returning: \_\_\_\_\_

Activity: \_\_\_\_\_  
 \_\_\_\_\_

Objective of Activity: \_\_\_\_\_  
 \_\_\_\_\_

Number of Students: \_\_\_\_\_ Name of Chaperons: \_\_\_\_\_  
 (Attach a list of student names.) Names: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Requestor's Signature \_\_\_\_\_ Date \_\_\_\_\_ Supervisor's Signature \_\_\_\_\_ Date \_\_\_\_\_

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**TRANSPORTATION**

Type of vehicle needed: \_\_\_\_\_ Driver: \_\_\_\_\_  
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**FOOD REQUEST**

Items Requested	Amount	Packed	Initials
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Scheduled by: \_\_\_\_\_ (Activities Coordinator) (Date) \_\_\_\_\_  
 Concurred by: \_\_\_\_\_ (Principal) (Date) \_\_\_\_\_

WHITE • Activities Coordinator      YELLOW • Food Service      PINK • Originator