OVERNIGHT FIELD TRIP REQUEST FORM

This form is to be used by school personnel requesting an overnight field trip to any planned event (academic competition, athletic competition, band trip/competition field trip, etc.). Overnight trips must be filed with the Superintendent at least three (3) months prior to the planned trip for approval of the Scott County School Board. Please attach an agenda.

Name of School		Grade/Group		
Activity/Event				
Location				
Date(s)				
Purpose of Trip				
No. of persons to be transported: _	Students_	Spon:	sors	Chaperone
Type of transportation:	_Chartered Bus	School Bus	Private Car(s)
If Chartered Bus, please provide na	ime of bus company, add	ress, and telephone r	number:	
Total cost of trip:				
How will trip be financed?				
Maximum Out-of-Pocket Student C	Cost:			
Estimated Student Cost (after fund	raisers, etc.):			
How will students unable to pay th	eir share be given an opp	ortunity to go on the	trip?	
Place/date/time of departure:				
Place/date/time of return:				
Name/address/phone no. of lodgir				

Name of teacher(s)/chaperone(s) accompanying group:				
pproved				

^{*}Include with the agenda, how students will be allowed to earn money to assist in paying for their expenses of the trip.

^{*}The Superintendent or his/her designee may revoke permission for a scheduled field trip if a natural or manmade incident(s) should create an unsafe environment for our students and staff.