



## STUDENT FIELD TRIP REQUEST

Use this form to request School Board approval for any student travel that is overnight in-state, out-of-state, or international. This form requires School Board approval. Please submit to the Office of the Superintendent at least 10 working days prior to a School Board meeting. **All lines must be completed.**

Traveling Individual(s) Group/Club: \_\_\_\_\_

Number of Students \_\_\_\_\_ Identifies as M \_\_\_\_\_ F \_\_\_\_\_ Non-Binary \_\_\_\_\_ Grade \_\_\_\_\_

*Include all traveling student names on back of form. If students are awaiting qualifications or other delays, submit a second request or hold this request until fully completed. Only students included on this form are approved.*

Number/Names of MVSD Staff \_\_\_\_\_ Identifies as M \_\_\_\_\_ F \_\_\_\_\_ Non-Binary \_\_\_\_\_

*Include all staff names; use back of form if needed. This is required.*

Number of Chaperones \_\_\_\_\_

*Include names of all approved volunteers; use back of form if needed. This is required. Chaperones must be age 21 or older.*

Name of current First Aid/CPR qualified individual traveling with group \_\_\_\_\_

School/Department: \_\_\_\_\_

Meeting/Conference Title: \_\_\_\_\_

*Forms associated with this request such as flyers, itineraries, or agendas may be attached.*

Destination: \_\_\_\_\_

Date(s) of Travel: \_\_\_\_\_ Type of Transportation: \_\_\_\_\_

Purpose/Objective of Trip: \_\_\_\_\_

<u>Expenses:</u>	<u>Estimated Cost</u>	<u>Budget Code</u>
- Registration	\$ _____	_____
- Mileage, Airfare, travel, etc.	\$ _____	_____
- Lodging	\$ _____	_____
- Meals	\$ _____	_____
- Other (describe) _____	\$ _____	_____

If fundraising or private funds are used, describe the activities, sources, and provisions made for students who cannot personally pay for the trip: \_\_\_\_\_

Requested by: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature)

\*Manager of Chargeable Budget: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature)

\*Principal/Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_  
(if different than above) (Signature)

\* Must be signed before seeking approval by the School Board

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Meeting/Conference Title: \_\_\_\_\_ Date of Travel: \_\_\_\_\_

Names of Staff

Names of Chaperones/Volunteers - Volunteers MUST be approved before submitting names.  
Minimum age requirement is 21.

Names of Students