

PRINCETON JOINT UNIFIED SCHOOL DISTRICT
P.O. Box 8 Princeton CA 95970

FIELD TRIP REQUEST

REQUESTED BY: _____ SITE: Elementary Jr. High Sr. High

DESTINATION: _____ Elem CDS HS CDS

CHARGE FIELD TRIP TO: _____ SITE COUNCIL APPROVAL DATE: _____
(If Applicable)

Circle District Goal(s) This Trip Will Enhance: 1 2 3 4 5 6 7 8 9 10 11

DATE OF PLANNED FIELD TRIP

DATE(s): _____ DAY(s) OF THE WEEK: _____

GRADE/CLASS/ORGANIZATION: _____ # OF STUDENTS / ADULTS: _____ / _____

DEPARTURE TIME: _____ RETURN TIME: _____ TOTAL HOURS: _____

CHAPERONES: _____

COST OF ADMISSION: \$ _____ Per Child \$ _____ Per Adult Other: \$ _____

TOTAL AMOUNT THAT IS STUDENTS RESPONSIBILITY: \$ _____

SUBSTITUTE TEACHER REQUIRED: YES / NO SCHOOL PREPARED SACK LUNCHES REQUIRED: YES / NO

If Yes - Total # of Sack Lunched Needed? _____

TRANSPORTATION REQUIREMENTS

TRAVEL NEEDS: _____ BUS (s) (Also Complete Gold Bus Request for District Office)

_____ VAN (s) (Also Complete Green Van Request for District Office)

DISTRICT DRIVER(s) REQUIRED? YES / NO TOTAL MILES ROUND TRIP: _____

Special Instructions if Any: _____

Bus w/Driver \$2.86/Mile w/o Driver \$2.00 Van w/Driver \$1.43/Mile w/o Driver \$ 1.00/Mile

APPROVALS:

Superintendent/Principal Signature Date

** DISTRICT OFFICE USE ONLY **

TOTAL TRIP CHARGE: \$ _____ ACCOUNT RESPONSIBILITY: _____

NOTE: Site office must receive a copy of all permission slips one day before departure and actual student list on the day of trip.

Field Trip Request Routing:

1-Form Completed 2-Forward to Principal for Approval 3-Forward to Supt. For Approval 4-Copy Sub Caller & Cafeteria

5-Copy Transportation Dept. 6-Copy Business Office 7-Copy District File