OVERNIGHT FIELD TRIP REQUEST FORM

This form must be completed AND approved at both the Education Committee Meeting AND the Regular School Board Meeting PRIOR TO the date of the trip. Contact the Assistant Superintendent's Office to verify meeting dates.

INSTRUCTIONS:

2. Building Prin	Incipal - Approve and forward to the Assistant Superintendent's Office for approval and	ai.
	n the Education Committee and School Board Meeting agendas. est has been approved at the School Board Meeting, a copy will be returned to the Originat	or.
Requested by:	Eileen Metzgar	
Group: Destination:	Washing ton D.C.	Elementary
Purpose: Adult Supervisors	cducational field trip of our country's insponsors: <u>Cileen Metzgar</u> , Kelli Taylor	
•	michelle Sallinger Oileen Metzgar	
Departure Date: Return Date:	March 27, 805 Time: 6:00 a.m. March 39, 8015 Time: 10:00 p.m.	
Number of Students Participating: 45 (RS-timate) Number of Students NOT Participating: /5 Number of Days Absent from School: () () ()		
Have any of the participating students been on other approved trips throughout the year?		
no		
Cost of Trip (Per I Student's Actual (How will money b		
	Pro Throughout YEar.	
this activity. If the	II explanation of the type of insurance coverage the student will have while here is no provision for insurance, all students participating must have the sign an insurance waiver form.	le participating in leir
	oaivers signed.	
Method of Travel	el & Name of Commercial Agency:	
Bus-Sch	nolastica Travel	
(BUS CO	ompany) TBD by Scholastica	
	vation, Address, Dates):	
Principal's Signat	Date approved by Education Committee: Date approved by School Board:	