

NORTHSHORE CHARTER SCHOOL

Request for School Related Field Trip

This form must be complete and submitted to the Principal and Transportation Department for approval prior to making reservations or taking money from students.

_____ Name of person making request	_____ Date of Request	_____ Date of Trip
_____ Title of Trip	_____ Number of Students	_____ Number of Chaperones
_____ Destination	_____ Approximate Mileage	

Explanation of Trip's Purpose and Relation to Curriculum & Instruction: _____

Chaperones (including parents): _____

Special Accommodations Required: _____

Name of Bus Operator and /or Driver

Does this trip involve another bus running the regular route for the bus making the trip? Circle **YES** or **NO**

If YES, complete the following: _____
Name of Bus Operator to Run Route One-Way Mileage of Route

***** SIGNATURES *****

Principal/Chief Executive Officer Date **Approved / Denied**

Supervisor of Transportation Date **Approved / Denied**

Chief Financial Officer Date **Approved / Denied**