

FIELD TRIP APPLICATION

LUCAS LOCAL SCHOOL

Date of Trip Group or Organization Date form submitted

Teacher in charge Purpose of Trip

School Building

Teachers Assisting

Lay persons Assisting

Destination and address

of Pupils Grades: pick up location

Method of Transportation Number of Buses requested

Schedule

Leave School Arrive at Dest. Include date if trip does not return on same day

Leave Dest. Arrive at School

Comments or Additional Details

Group will stop to eat YES NO

Students will

- be absent from cafeteria
- require special food
- accomodations as listed below

Signatures
Teacher _____

Principal _____
(comments)

Superintendent _____
(comments)

COPIES FROM SUPERINTENDANTS OFFICE TO:

TEACHER IN CHARGE PRINCIPAL APPROVING APPLICATION CAFETERIA SUPERVISOR
ASSISTANT TREASURER TRANSPORTATION SUPERVISOR OTHER _____