

Laurel Highlands School District
Out of County Overnight Field Trip Information Form
8/8/17

1. State the name and location of the desired trip: _____.
2. Date of trip? _____
3. Transportation company? _____
4. State the organization/Booster Group funding this trip? _____.
5. Reason for trip? _____
6. If this is an out of state trip, list the state the students will be traveling: _____.
7. State the phone number and address of the hotel/motel where the students will be lodging while away: _____.
8. Is there school faculty involved with this trip? _____.
9. When will the students be out of school? First day out: _____. Date of return: _____.
10. Do ALL chaperones have the state and district required clearances to chaperone this trip?
Yes: _____ No: _____.
11. How many students will be participating in this trip? _____.
12. How many chaperones will be attending this trip? _____.
13. Building Administrator Approval Signature: _____.

Request by _____

Date: _____

Building Principal: _____

Date: _____

Superintendent: _____

Date: _____