

CHARTER/TRIP REQUEST FORM

**Trip requests must be in Elementary/Secondary Administration *at least 3 weeks prior to trip date*.**

**The requesting school/department is responsible for tracking the timely completion of this form.**

**Revised 10/12/17**

|  |  |  |  |  |  |  |  |  |  |  |  |
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| **A. Request by School (trip logistics)** | | | | | | | | | | | |
| **School:** |  | | | |  | **Date of Trip:** | | | |  | |
| **Teacher(s):** |  | | | |  | **Contact information: Extension or cell phone #** | | | |  | |
| **Destination:** |  | | | | | | | | | | |
| **Address:** |  | | | | | | | | | | |
| **Is this a walking trip that does not require transportation?** | | | | | | **⬜ YES ⬜ NO** | | | | | |
| **No. of Adults/ Chaperones:** |  | | | |  | **No. of Students and Grades:** | | | |  | |
| **Number of Buses Requested:** |  | | | |  | **List Special Requirements (Harness, Car Seat, etc.):** | | | |  | |
| **Pick Up Time at School:** |  | | | |  | **Return Time at School:** | | | |  | |
| **Purpose of Trip (educational rationale must be attached):** | | | | |  |  | | | | | |
| **Payment (the use of cash as a form of payment will not be allowed): Select one** | | | | | | **⬜ Check/Money Order** | | | | | |
| **⬜ General Fund** | | | | | |
| **⬜ Grant Funded (obtain verbal approval by Account Manager)** | | | | | |
| **⬜ Third Party\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | |
| **Account Manager’s Name/Dept./Date of Approval:** | | | | |  |  | | | | | |
| **Transportation (Bus) Cost (verbal estimate x8015):** | | | | |  |  | | | | | |
| **Bus Company/Contract #:** | | | | |  |  | | | | | |
| **Contact person at transportation:** | | | | |  |  | | | | | |
| **Principal’s Signature/Date:** | | | | |  |  | | | | | |
| **Are you submitting the request at least 3 weeks prior to the trip date:** | | | | | | | | | | **Yes  No** | |
|  | | | | |  |  | | | |  | |
| **B. Review by Account Manager** | | | | | | | | | | | |
| **Reviewed by and Date:** | |  | | |  | **Approved  Disapproved** | | | | | |
| **Type of Account:** | **Fund: \_\_\_\_\_\_ Dept. \_\_\_\_\_\_\_ Project: \_\_\_\_\_\_\_ Activity: \_\_\_\_ Account:\_\_\_\_\_\_\_\_** | | | | | | | | | | |
| **Requisition Entered By:** | |  | | **Requisition Number:** | | |  | | **PO Number:** | |  |
|  | | | | | | | | | | | |
| **C. Approval by Elementary or Secondary** | | | | | | | | | | | |
| **Reviewed by and Date:** | | |  | | | **Approved  Disapproved** | | | | | |
|  | | | | | | | | | |  | |
| **D. Transportation Use Only** | | | | | | | | | | | |
| **Type of Vehicle(s): S/B  M/B  V  WC/V  Coach** | | | | | | | | | | | |
| **Date Booked:** |  | | | |  | **Bus Company:** | |  | | | |
| **Booked by:** |  | | | |  | **Confirmed by:** | |  | | | |
| **PO Number:** |  | | | |  | **Invoice Number:** | |  | | | |



**Charter/Trip Request Rationale Information Sheet**

(Please attach this rationale to the Charter Trip request. No Field trip will be approved without this document.)

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| **Trip Destination:** | |  | |
| **Total cost Per Student:** | |  | |
| **Theme/Unit of Study:** | |  | |
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| **Rationale:** | |  | |
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| **Standards:** | |  | |
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| **Ratio of Chaperone to Students:** | |  | |
| **Other Information:** | |  | |
| **Are you submitting the request at least 3 weeks prior to the trip date:** | | | **Yes  No** |
| **Principal’s Signature and Date:** |  | | |
| **Approved  Disapproved** | | | |