STUDENTS BEECHWOOD INDEPENDENT SCHOOLS 09.36 AP.21	TRANSPORT/FIELD TRIP REQUEST FORM
TODAY'S DATE 2/6/25 = Elementary High School = Faculty/Staff/Coach/Sponsor(s) Molly Seifert Date(s) of Trip March 14-15*** Departure Time Fri. 3/1	Guardian Angel 9:00 am Return Time Sat. 4/15@ 8:00 pm
*If Peanut/Tree Nut Allergy Safety Alert is checked on the School-Relate AP.211) then faculty/staff member(s) sponsoring this trip are responsibe procedure related to foods on trip. Also, staff are required to know wh	le to ensure buses/mode of transportation comply with
TYPE OF TRIP (CHECK ONE): Classroom Field Trip, Specify Class Class Trip (i.e. Comparison Club Trip, Specify Forensics Other (at Team)	hletic, band), Specify
**DESTINATION Centre College Miles (one way) to de Overnight: Give name of lodging and address Hampton TRANSPORTATION (to be completed by Requestor) FORM has been completed and approved by Jim Swift and in	Enn, 100 Montgomery Way;
**Does the trip exceed 100 miles? Yes - No If Yes, trip require	es Board of Ed approval. See Below.
☐ Use of Common Carrier in Lieu of School Bus Procedure 09.36 ☐ Private Vehicle, if allowed by policy. Specify Driver(s)	
Purpose/Educational Value Speech & Dabor Number of day	s absent from school
Number of: Students Going on Trip5 Faculty/Staff O	ther Chaperones
ARE ALL CHAPERONES ON THE VOLUNTEER LIST? YES NO IF LEADER FORM AND BE APPROVED PRIOR TO CHAPERONING.	NO, THEY WILL NEED TO COMPLETE THE YOUTH
SUPERVISION – Attach a list of names of adults	accompanying students on trip.
Trip Approved □Yes □No Principal	Signature Date
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Trip Approved □Yes □No Superintendent/Designee	Signature Date
□Yes □No Board of Education if applicable	Signature Date

Related Procedures: 09.36 AP.211, 09.36 AP.212, 09.36 AP.23 Review/Revised: November 2018 Page 1 of 1

MUST COMPLETE PAGE 2 AS WELL and turn in with request form.