

ELMSFORD UNION FREE SCHOOL DISTRICT

Request for Educational Field Trip

Directions: Please complete this form for all educational field trips. **Please be advised that this form must be received by the business office no later than five (5) business days AFTER final approval is received by the Superintendent of Schools.**

School: _____ Date: _____ Teacher: _____

Trip Information:

Grade: _____ Subject: _____ Activity or Competition: _____
Destination/Location: _____ Date of Trip: _____

Explain how the objectives of this trip will enrich and extend student learning **AND** align with the NYS Learning Standards:

Time leaving school: _____ Time returning to school: _____
Cost per student: \$ _____ Other costs to student: \$ _____
Number of students: _____ Number of teachers: _____
Number of chaperones: _____

(Attach a list of students, teachers and chaperones)

Transportation via:

- School bus(es). If so, how many? _____
- Contracted carrier – specify company and number of buses: _____
- Private transportation
- Public transportation
- Other _____
- (If a contracted carrier is involved, the transportation supervisor must be consulted before making any arrangements.)*

Funded by District Budget Code(s) to be used: _____
 No Cost to District Reason: _____

Requestor's Signature: _____ Date: _____

Business Official: _____ Date: _____

Office Use Only

Approvals:

Principal: _____ Date: _____

Deputy Superintendent for Instructional Services: _____ Date: _____

Superintendent: _____ Date: _____

Please attach permission slips, insurance certificates and other required documentation.