HOMER CENTRAL SCHOOL
BOARD OF EDUCATION
Field Trip Request Form

School Group/Organization: _____

Destination: _____

Field Trip Dates (Departure-Return): _____ Date submitted: _____

Advisor(s): _____ Number of Students: _____ Number of Chaperones: _____
_____
_____

Building: _____ School Days Absent: _____
Explanation: _____
_____
_____
_____
_____

Cost to Student: _____

Fund Raising Required: _____

Transportation (Circle one): School Bus Charter Airplane Other

Itinerary (Use other side or include attachment):

Purpose of Trip (Educational Value): _____
_____
_____
_____

It is the responsibility of the teacher organizing this activity to inform parents of the possibility that all or part of any deposit may be lost in the event the School Board or Administration is forced to cancel this trip.

Approved by Administrator: _____ _____
(Administrator's Signature) *(Date Approved)*

Submitted to Board of Education for Approval: _____