

HENRY COUNTY BOARD OF EDUCATION FIELD TRIP REQUEST FORM

TO: Transportation transportation@henrycountyboe.org

TRIP DATE	TODAYS DATE	BILL TO ORG/SCHOOL:
TRIP DESTINATION(specifics) Address:		
GRADE	SCHOOL	
If you're providing	a Coach/Teacher to drive:	Name(s) :
EDUCATIONAL C	BJECTIVE OF TRIP	
		Special Needs? (list)
*Please write school	ol activity on the Extracurric	cular Pre Trip Inspection Record.
DEPART TIME	RETURN TIME_	NUMBER OF BUSES NEEDED:
regular school hours. responsible for leaving	*Sponsoring group will pay for the bus CLEAN after the tri	n to/from departure point unless field trip is during or driver, fuel, and mileage. *Sponsoring group is p (and before the driver's regular run begins). Penalty e \$50 billed to the sponsor's school.
		the trip for parents to sign and return to school granting h to be contact in case of emergencies.
		THORIZATION************************************
FIELD TRIP COORDI	NATOR/TEACHER	DATE(7daysprior)
PRINCIPAL		DATE(7daysprior)
TRANSPORTATIC	ON SUPERVISOR	DATE
BUS/DRIVER(S)		Bus#
		Bus#