## **Mountain Brook City Schools Field Trip Request Form**

Teacher's Name:	Date:
Class, Grade, or Organization:	
Number of Students:	Date(s) of Trip:
Travel by:	
Destination:	
Cost to Student for Trip:	Number of Chaperones: (Attach list of names)
Time Leaving School:	Teachers/Staff: Parents:
Arrival Time Back at School:	Other: TOTAL NUMBER:
Nature and Educational Purpose of the Trip:	
Brief Itinerary of the Trip: (Attach information, if available	able)
Special Safety Precautions, If Any, Which Will B	e Required:
APPROVAL: The above requested field trip	is approved is not approved
Principal:	Date:
OUT OF STATE FIELD TRIPS ONLY:	
APPROVAL: The above requested field trip	is approved is not approved
Superintendent:	Date:
	be submitted in writing for approval by the

After the principal approves the field trip request, it will be returned to the teacher. If the Superintendent's signature is required for approval, the teacher is responsible for obtaining the approval.