

Field Trip Request Number

Regional / Loc. # Assigned #

Agenda Month

BUS ONLY REQUEST**AGENDA**

For SCHOOL BUSINESS ADM Use Only

FIELD TRIP REQUEST FORM

Date Rec'd by Reg. Office		Date Sent to SBA's Office		Date Rec'd by SBA's Office	
SCHOOL(S): West Side Campus (Newark Early College and Newark Vocational)			PRINCIPAL: Mr. Ramkissoon		
GRADE(S):			NUMBER OF CLASS(ES):		
FIELD PERSONNEL:					
ACTIVITY:					
DESTINATION:			CITY:		STATE:
DATE OF TRIP:				DURATION OF TRIP:	
Time of Departure:			Time of Departure from Field Trip Location:		
Trip Financed by:		District Funds: \$0	With Fund Raising/Donations:		No Cost to NPS:
# of Students:		Cost / Student: \$0	Total Cost / Students: \$0		
# of Employees:	# of Free Emp:	Cost / Employee: \$0	Total Cost / Employees: \$0		
# of Chaperones:	# of Free Chaps:	Cost / Chaperone: \$0	Total Cost / Chaperones: \$0		
Total Attendees:			Parking Fees/Adm. Cost: \$0		
Grand Total: \$0					

of School Buses Needed:

of Small School Buses Needed:

MUST SUBMIT A BUS RATIONALE FORM IF REQUESTING A COACH BUS

of Coach Buses Needed:

NAME AND ADDRESS OF TRANSPORTATION COMPANY (IF NOT THROUGH PUPIL TRANSPORTATION) _____

PLEASE NOTE: The principal shall attach the following information if the transportation company is not on approved list: (1) certificate of automobile liability insurance in the amount of at least \$3,000,000 combined single limit, naming the Newark Public Schools as additional insured and also furnish documentation of uninsured/underinsured motorist coverage with a limit of not less than \$3,000,000 combined single limit; and (2) copy of driver's most recent motor vehicle record which is on file with the transportation company and driver's license.

Field Trip Rationale Form Must be Submitted.

Approved: _____
Principal / Vice Principal

_____ Date

Approved: _____
Assistant Superintendent or Designee

_____ Date

Approved: _____
State District Superintendent

_____ Date