



The School District of Greenville County
Field Trip Request Form

To: Nerissa Lewis

From: _____

School: Mitchell Road Elementary

Group: _____

Date Submitted: _____

(3 weeks prior to trip)

The following information is submitted for your consideration and approval of a field trip:

1. Person in charge of arrangements _____
2. Location: _____
3. Scheduled date of departure _____ and time _____
4. Scheduled date of return _____ and time _____
5. Total number of days and nights: _____ days and _____ nights
6. Method of transportation: _____
7. Number of Participants Attending the Field Trip:

Number of teachers _____

Number of students _____

Number of parents _____

Total Number of participants (riding the buses) _____

8. Estimated cost per student and method of defraying expenses

*9. A **Field Trip Permission Slip** has been received for each student ____ Yes ____ No

*10. **Three weeks prior to Field Trip**

Cafeteria notified ____ Yes ____ No

If Yes, cafeteria manager signature _____ Date _____

Related Arts notified ____ Yes ____ No

****Before leaving for your trip, a complete copy of this form must be given to Nerissa for Principal approval.**

Teacher

Date

Principal

Date

****MRES last day for field trips is April 30, 2014****

6/14/12

Field Trip Plan

1. Number of students with School District accident coverage. _____
2. Number of student with Family Policies: _____
3. Name of adults supervising the trip.

4. Contact source and phone number during the trip (for emergency use)

5. Attach a copy of the itinerary. If this is to be an overnight trip, the following additional information is required:
Hotel Name _____
Address _____
Phone Number _____
List each additional overnight accommodation: _____

6. Plans for non-participatory students developed? _____ Yes _____ No
7. Names of adults supervising non-participatory students (Attach list of students and location of students): _____
8. Provide a brief statement describing the purpose of this field trip. _____
