

ORCHARD VIEW SCHOOLS

FIELD TRIPS REQUEST

1. Must be educational in nature (rationale and goals should be provided).
2. Must be properly chaperoned (teacher and parents)
3. Should be limited to the Muskegon / Grand Rapids area.
4. Must be approved first by the building administrator, sent to the transportation supervisor and then to the superintendent.
5. Requestor is responsible for providing directions and agenda to the driver.

Bus / Van Field Trip Request Form

Date Requested _____

Date Needed: _____

Destination: _____

Return Date: _____

Departure Time: _____

Departure Place _____

Number of buses needed? _____ (Buses fit approximately 70 per bus @ 3 in a seat).

Please complete one: Time you would like to be back at OV _____

Time you would like to leave your event _____

Purpose of the Trip: _____

Number of Students: _____

Chaperones: _____

Educational Value and Goals: _____

Requested by: _____

REQUIRED INFORMATION

Building and/or address for billing purposes: _____

MUST SELECT ONE

General Fund Budget Building Field Trip Account #: _____

Student Activity Account: _____

At Risk Field Trip (with account # & pre-approval by Director of Finance) _____

Other: _____

Approvals

Building Administrator: _____ Date: _____

Transportation Administrator: _____ Date: _____