

## Plymouth-Shiloh Local School District Student Field Trip Request

Teachers' Name	Date
Date of Field Trip	Destination
Estimated Mileage	Sponsoring Group
School Departure Time A   Destination Departure Time A   Arrival Time Back at School A	M./P.M.
# of Students # of Teachers # of Othe	er Supervisors # of Busses Suburban
Organization, class or grade level that will parti	Approved     Denied     Notified
	m of the District and in what ways will the students and
What staff member will be in charge? What arrangements have been made for dealing	with an emergency situation?
	during and after the trip?
Are all volunteers board approved and fingerprid What is the cost per student if any? If fundraisers are planned to offset the cost, have office? Yes No	nted? <u>Yes No</u> 
Teachers Signature	

**Note: No school employee or chaperone may transport students in personal vehicles.** Field Trip Request, 5/22/18