

SOUTHEAST FOUNTAIN SCHOOL CORPORATION
744 East U.S. Highway 136
Veedersburg, Indiana 47987

FIELD TRIP REQUEST

Requesting Teacher: _____ Date Submitted: _____

Organization: _____ Number of Participants: _____

Purpose of Trip: _____

Destination: _____ Date of Trip: _____

Method of Transportation: _____ Date of Return: _____

Time of Departure: _____ Estimated Time of Arrival: _____

Time of Return Departure: _____ Estimated Time of Return: _____

Names of Adult Sponsors: _____

I understand that parental permission forms for each participating student are to be in the possession of the Principal prior to departure.

Signature _____
Sponsoring Teacher

Recorded on Master Activities Calendar: _____

Activities Director Signature: _____ Date: _____

APPROVED BY: _____ Date: _____

Building Principal

TRANSPORTATION TO BE PAID BY: CORP _____ GROUP: _____

APPROVED BY: _____ Date: _____

Superintendent

OUT-OF-STATE TRIPS REQUIRE BOARD ACTION: _____

DATE: _____ ATTEST: _____

Secretary of Board of School Trustees