**SCHOOL TRIP REQUESTS**

**Type of school trip**: In-State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Out-of-State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Competition\_\_\_\_\_\_\_\_\_\_\_\_

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| **School** | **Teacher Making Request** | **Class or Club** | **Number of Students** |
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| **Email address:**  |

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| --- | --- | --- | --- |
| **Date of School Trip** | **Number of Days** | **Departure Time** | **Returning Time** |
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| --- | --- |
| **Name of school trip:** |  |
| **Cost per student:** |  |
| **Location where activity will occur:** |  |
| **Itinerary:** | Attach a detailed itinerary. |
| **How does this trip relate to the North Carolina Standard Course of Study?** | Attach a list of specific objectives. |
| **Parental Consent Form (Administrative Regulation - II.D.5):** | Attach a parental consent form. |

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| **Teacher and/or adult chaperones (1:10 ratio) –**  | Attach a list of chaperone names. |
| **Transportation needs:****PLEASE NOTE: Request for Extra Transportation” form (if needed) should be submitted to Mr. Jimmy Hewett for approval prior to submitting request for approval to the superintendent.** | Activity Bus \_\_Chartered Bus \_\_Bus for Disabled \_\_\_ |

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| **Signature of Principal Date** | **Approved** | **Not approved**  |
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| **Signature of Superintendent Date** | **Approved** | **Not approved**  |
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**NOTE: All school trips must be in accordance with Columbus County Schools Administrative Regulation: AR Code: 3320-R School Trips issued on August 3, 2015.**

**Out-of-State and/or overnight trips** must also be approved in advance by the principal and submitted one month in advance of the trip to the superintendent for approval by the Columbus County Board of Education.

 **All other requests** must be submitted to the superintendent two weeks prior to the field trip.