

THIS FORM
MUST BE
SUBMITTED
FOR APPROVAL
(FOUR) 4
WEEKS PRIOR
TO FIELD TRIP



Bartow County School System Educational Field Trip Request

School Name: _____ Grade/Teachers/Team: _____

Destination: _____ City: _____ Date of Trip: _____ Day: _____

Day Trip _____ Overnight _____ Extended Day _____

Round Trip Mileage: _____ Method of Transportation: _____

Number of Persons being Transported: _____ Number of Buses (If Needed): _____

Bus Driver Needed: Yes No Time Away From School: _____

Objective of Trip (*Use extra paper if necessary*): _____

Prior Preparations (*Instructional activities or unit of study related to trip must be completed before trip*):

Follow-Up Activities (*to be completed within 5 days after trip*): _____

Cost for Trip: _____ Funding Source: _____

Plans for Students Not Going on Field Trip: _____

Teachers or Other Personnel Serving as Chaperones:

- | | |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Approved By: (After Principal approval, please forward to the Deputy Superintendent for instructional trips and the system Athletic Director for athletic trips.)

1. Principal: _____ Date: _____

2. Deputy Superintendent: _____ Date: _____

3. System Athletic Director: _____ Date: _____

Copy: Transportation Department

No field trips or competitions will be approved during testing.

Revised: August 2019