

Field Trip Request Form – Bessie Allen Middle School

Grade Level _____ Staff Contact _____ Date _____

Staff and Parent Chaperones Attending

_____ background check approved needs background approved

_____ background check approved needs background approved

_____ background check approved needs background approved

_____ background check approved needs background approved

_____ background check approved needs background approved

*include any adults that are attending – staff already have an approved background check

Destination _____ Event Date _____

City/State of Event _____ # of Students _____

Departure Time _____ Return Time _____

Funding

Bus Cost _____ Activity Cost _____ Total Cost _____

Price you are charging students _____

Additional Funds Requested _____

For Office Use

Approval _____

Bus Ordered _____yes Date _____

