

**East Central High School  
Request for Approval of Field Trip-Form 2**

Complete all of the following information as part of your request. Request at least 2 weeks in advance of the event.

Today's Date: \_\_\_\_\_

1. Name of Event: \_\_\_\_\_

Purpose of Event: \_\_\_\_\_

2. Date of Event: \_\_\_\_\_ Day of Week: M T W T F S Sn (Circle One)

Location of Event: \_\_\_\_\_

3. Students: Attach list if needed.

\_\_\_\_\_  
\_\_\_\_\_

4. Length of Stay: \_\_\_\_\_

5. Cost per student: \_\_\_\_\_

6. Is this event paid by student, club, or district? \_\_\_\_\_

7. Number and names of chaperones who will be attending this event: \_\_\_\_\_ Cell Phone # \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Method of transportation: \_\_\_\_\_

9. Total estimated cost of trip: \_\_\_\_\_

10. **Substitute Needed?** Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, Funds paying for sub: \_\_\_\_\_

Upon approval of the Principal, obtain signed parent permission slips for each student who will be participating and place these on file with the Principal.

Special Notes to Administrator: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Before departure, have in your possession information for your use in the event of an emergency; name, address, and phone number of parents.

\_\_\_\_\_  
**Teacher/Sponsor Signature**

**Date**

\_\_\_\_\_  
**Teacher/Sponsor Signature**

**Date**

**#1. ACADEMIC DEAN'S SIGNATURE OF APPROVAL:** \_\_\_\_\_

**#2. PRINCIPAL'S SIGNATURE OF APPROVAL:** \_\_\_\_\_

(MUST BE APPROVED BY BOTH)

(For Office Use) Notes: