## Field Trip Request Form

All Field Trips proposals must be submitted at least fifteen (15) school days prior to the trip date for approval. All proposals must be submitted electronically and printed with signatures from the Principal, Superintendent, and Student Services Coordinator.

No field trip will be conducted until all language in the contract is approved by the Principal, Chief Operations Officer & Superintendent. A minimum of thirty (30) school days prior to any required contractual deadlines is recommended to obtain approval.

## Procedure:

- 1. Teacher-In-Charge complete Field Trip Request Form, attaches contract/agreement/itinerary when appropriate, and submits to Principal, COO & Superintendent for approval.
- 2. Principal, COO & Superintendent will meet to make field trip decision and seek board approval if necessary.
- 2. Principal contacts the Teacher-In-Charge via email (cc'd with COO & Superintendent) within five (5) school days regarding the approval or denial of a trip. If approved, trip is announced to students, and permission slips are sent to parents.
- 3. Permission slips are given to the Principal prior to the trip, and emergency/health forms are taken with the Teacher-In-Charge.
- 4. Principal will retain permission slips until the end of the school year.

Please put N/A for any non applicable questions.

*	
	Extended Day
<b>~</b>	Overnight
	Non-School Day
	During the School Day
	Other:

School \*

☐ TEACH Academy of Technologies
TEACH Tech Charter High School
Option 3
Other:
Grades Included *
☐ 5th
☐ 6th
7th
☐ 8th
_ 9th
✓ 10th
11th
12th
Destination *
Camp Whittle
Departure Date *
MM DD YYYY
05 / 03 / 2019

Field Trip Request Form

2/7/19, 2:10 PM

Departure Time *
Time
01:30 PM -
Detuma Dete
Return Date *
MM DD YYYY
05 / 05 / 2019
Return Time *
Time
11:00 AM -
Objective of Trip *
Science/ social skills
Teacher In Charge *
Mr. Ellis
Teachers Emergency Cellphone Number *
323-376-0013
JZJ-J/ U-UU I J

Cost Per Puil \*

\$132
Number of Students *
50
Do any of your students require special assistance? *
○ Yes
No
If so, please explain.
Ratio of Chaperones to Students *  10-1
Names of ALL Staff Attending Trin *
Names of ALL Staff Attending Trip *
Williams, Ellis, Morgan, Johnston, Jones, Haydel, Pe, VanMatre
Names of Non-Staff Chaperones *
Mrs VanMatre
Mrs. VanMatre

bus Company Name / Phone Number **
FCOC Transportation
Bus/Van Confirmation Number (for confirmation emails, please print and attach) *
pending
Meal Arrangements *
5 meals per person are included
What fundraising or other cost mitigation has been done in preparation for this trip? *
N/A
Signature of Superintendent
Carranza
Signature of Principal
Williams

Ellis	
Signature of Student Services Coordinator	
Upload Itinerary & Contract	
YMCA Camp Whittl	

This form was created inside of TEACH Public Schools.

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