

\_\_\_ Teacher  
\_\_\_ Principal  
\_\_\_ Transportation  
\_\_\_ District

# STUDENT TRIP REQUEST FORM

Please note: This form must be received in the District Office by **September 20, 2022.**

TODAY'S DATE \_\_\_\_\_ DATE OF TRIP \_\_\_\_\_

DESTINATION \_\_\_\_\_

NUMBER OF MILES **ROUND TRIP** (as per Map Quest) \_\_\_\_\_

NUMBER OF STUDENTS \_\_\_\_\_

NUMBER OF ADULTS \_\_\_\_\_

TIME LEAVING \_\_\_\_\_ TIME RETURNING \_\_\_\_\_

SPONSOR OR SUPERVISOR \_\_\_\_\_

PURPOSE OF THIS TRIP \_\_\_\_\_  
\_\_\_\_\_

(check one) THIS TRIP IS \_\_\_\_\_ A FIELD TRIP OR \_\_\_\_\_ AN EDUCATIONAL TRIP\*

*\* If this trip is an EDUCATIONAL TRIP, please complete the ISBE Regular Pupil Transportation Reimbursable Field Trips Worksheet prior to the trip and give to the District Office.*

NUMBER OF TRIPS THIS SPONSOR or TEACHER WILL BE TAKING THIS SCHOOL YEAR \_\_\_\_\_

**TRANSPORTATION REQUESTED: CHECK ONE:**

\_\_\_ BUS

\_\_\_ VAN (cannot exceed 14 plus driver) DRIVER \_\_\_\_\_

\_\_\_ OTHER (please describe) \_\_\_\_\_

**REMINDER: UP-TO-DATE LIST OF STUDENTS AND CHAPERONES MUST BE PROVIDED TO BUS DRIVER AS THE BUS IS LOADED...NO EXCEPTIONS. Please use the Field Trip Participants Form.**

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***Requests should be approved in the following order:***

PRINCIPAL APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

DIRECTOR OF TRANSPORTATION: YES \_\_\_\_\_ NO \_\_\_\_\_ DATE \_\_\_\_\_

SUPERINTENDENT APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_