

## North Canton City Schools Field Trip Request

Teachers		School		
Group/Grade/Class		Number of students		
Date of trip	Location			
Purpose (how the trip relates to the curriculum)				
Career Exploration (what career will you discuss with the group as a result of this trip?)				
Transportation provided by:	School bus <input type="checkbox"/>	School van <input type="checkbox"/>	Charter bus <input type="checkbox"/>	No transportation needed: <input type="checkbox"/>
Other <input type="checkbox"/> (please explain)				

Departure time	Lunch plans, if needed
Return time	Cost to student (itemize)
Contact person, phone	Costs covered by support group
Other (if overnight, include hotel, planned stops, etc.)	
Chaperones	

Submitted by (signature) \_\_\_\_\_ Date \_\_\_\_\_



Approve	Deny	Signature	Date
_____	_____	_____ Principal/Supervisor	_____
_____	_____	_____ Curriculum Director	_____

Date of Board of Education approval \_\_\_\_\_  
(Required for out-of-state or overnight trips.)