

ALL COMPLETED STUDENT FIELD TRIP FORMS, ALONG WITH AN ALPHABETIZED LIST OF THE STUDENTS ATTENDING, A DETAILED ITINERARY, INCLUDING HOTEL ACCOMODATIONS (IF AN OVERNIGHT TRIP) AND ANY OTHER INFORMATION REGARDING THIS FIELD TRIP, MUST BE ATTACHED TO THIS REQUEST FORM. IN ADDITION, CHAPERONES AND DRIVERS (CELL PHONE NUMBERS INCLUDED) MUST BE LISTED AND ALL CHAPERONE FORMS & DRIVER FORMS MUST BE ON FILE AND CURRENT IN ORDER TO RECEIVE APPROVAL FOR YOUR FIELD TRIP. PLEASE SEE COVER SHEET FOR TIMELINES.

NEVADA JOINT UNION HIGH SCHOOL DISTRICT
REQUEST FOR FIELD TRIP

Class/Organization/Activity Involved: _____

Date of Trip: _____ From: _____ to _____

Periods to be Missed: _____

Destination: _____

Purpose of Trip: _____

Transportation Method:

School Bus _____ School Vehicle(s) _____ Rentals _____ Private Cars _____

Number of Students Involved: _____ Number of Adults: _____

Parent Permission, Zero Tolerance & Medical Forms completed and copy turned in: _____

Signature of Field Trip Supervisor: _____ Date: _____

CPR/1st Aid Certification: It is mandatory that all field trips have a staff member currently certified in CPR/1st Aid and the certification must be on file in the health office.

Name of staff member certified: _____ Date Certified: _____

*Approved: _____ Not Approved: _____

(1) Signature of Dept. Chairperson

(2) Signature of Chris Espedal

(3) Signature of Patti Ehlers

(4) Signature of Principal/Designee

Budget to be Charged: _____

FIELD TRIPS OVER 150 MILES (ONE WAY), OVERNIGHT AND OUT OF STATE ARE TO BE APPROVED BY THE DISTRICT

FOR DISTRICT USE ONLY

Field Trips over 150 miles (one way), overnight and out of state

☐ Approved

☐ Not Approved

Signature of Superintendent/Designee

Date