## **REYNOLDS SCHOOL DISTRICT FIELD TRIP REQUEST**

Trip Date									
Reason For Trip									
Trip Type		reimb	ursable trips are; athlet	ension of the classroom (a lessi ic trips, competition drama, m trip that is not an extension of	usic, etc, traveling be	yond 100 miles from t			
Origination From	(School Name)			Departure Date		Retu	rn Date		
Departure Time F	rom Origination S	Site	Arrival Time At Destination Depart			eparture Time	ure Time From Destination		
Where should the	e buses load at the	e Originating	g School						
Allowable Field	d Trip Hours: 8	:30am-2:0	0pm. On La	te Start Days Ho	ours Are: 9	:40am-2:00	pm		
Destination									
Destination Addr	ess								
# of Adult Males	# of Adult	t Females	# of Stu	ıdents	Grade Level	# o	of Wheelchairs		
# of Vehicles (Buses				students (3 students t) - <b>WE TRY TO KEEP</b>					
Will you need	a bus with und	ler storage	??						
Contact (Teacher's	Name)			Contact Phone Nu	ımber(Teache	r's Cell Phone #	<b>#</b> )		
Payment Informa	tion		Budget #						
Grant Name & Nu	ımber								
Outside Source (C	Contact Person, Bi	illing Addres	s & Phone #						
Is the outside pay	ment source, pro	viding a ser	vice as a partno	ership to us:					
You are responsib	ole for lodging and	d meals for F	Reynolds and/o	or Charter compan	y driver(s).				
required.			•	s School District Po	•		school board	d approval is	
[ I (the teacher) u	understands and hav	ve reviewed t	he bus rules wit	h my students. ***Be	sure to revie	w attached wel	b links***		
http://policy.	osba.org/reynolds	s/e/eeacc%2	<u>20g1.pdf</u> <u>ht</u>	tp://arcweb.sos.sta	ate.or.us/pag	ges/rules/oars	500/oar 58	31/581_053.html	
Teacher's Signatu	ure					Date [			
Administrator's A	pproval					Date			