



TRAVEL REQUEST FORM

Teacher:	School: Course:
Departure/return dates:	Destination:
Number of school days impacted:	Rationale for taking trip during school:

Purpose of trip (attach additional pages if necessary):

Itinerary (stops/schedule):

Vendor/program provider:				
Has this vendor/program been used by this grou	p in the past?			
Mode of transportation:	Cost of transportation:			
Number of students traveling:	Adult/student ratio:			
Total cost of trip: Cost to each student:				
Is fundraising available?	List fundraising opportunities:			
How are teacher travel expenses funded?				
Due date for permission slips, prearranged absence, and code of conduct forms:				
Names of adults accompanying the group:	Relationship to group (teacher, parent, etc.):			

Safety precautions to be implemented and emergency protocol:

Name of the individual going on the trip who holds a valid American Red Cross Standard First Aid card or equivalent certification (<u>REQUIRED FOR ALL TRIPS</u>)

This field trip is an extension of:		
	(subject)	(unit or project)

Learning objectives (include MCPS content standards addressed - attach additional pages if necessary):

Follow-up activities back in the classroom:

<u>*Field trips of a distance exceeding 400 miles (one way)</u> require principal and superintendent/designee approval at least 60 days in advance. Students earning the right to travel for competitions with less than 60 days notice will receive special consideration.

<u>*Travel outside of the country</u> requires principal, superintendent/designee, and Board of Trustees approval at least 6 months in advance. <u>*All other field trips</u> require principal approval.

(Principal Approval)	Date:
(Superintendent/Assistant Superintendent Approval)	Date:
(School Board Trustee Approval)	Date: