

WILLINGBORO PUBLIC SCHOOLS FIELD TRIP REQUEST FORM

DATE SENT TO OFFICE OF ASSISTANT SUPERINTENDENT FOR CURRICULUM & INSTRUCTION FOR APPROVAL: _____

SCHOOL(S):	PRINCIPAL:
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GRADE(S):	NUMBER OF CLASS(ES):
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GROUP/CLUB/ORGANIZATION:

ACTIVITY:

DESTINATION:	CITY:	STATE:
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DATE OF TRIP:	DURATION OF TRIP:
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Time of Departure:	Time of Departure from Field Trip Location:
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Trip Financed by:	District Funds:	With FundRaising/Donations:	No Cost to WPS:
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# of Students:	Cost per Student: \$	Total Cost for Students: \$
# of Employees:	Cost per Employee: \$	Total Cost for Employees: \$
# of Chaperones:	Cost per Chaperone: \$	Total Cost for Chaperones: \$
Total Attendees:		Grand Total: \$

# of School Buses Needed:	Cost per Bus: \$	Total Cost for Bus(es): \$
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# of Small School Buses Needed:	Cost per Bus: \$	Total Cost for Small Bus(es): \$
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Total # of Buses:		Total Cost for Buses: \$
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WHEN REQUESTING A COACH BUS THE RATIONALE FORM MUST BE SUBMITTED

# of Coach Buses Needed:	Cost per Bus: \$	Total Cost for Coach Bus(es):\$
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NAME AND ADDRESS OF TRANSPORTATION COMPANY (IF NOT THROUGH PUPIL TRANSPORTATION)

PLEASE NOTE: The principal shall attach the following information if the transportation company is not on approved list: (1) certificate of automobile liability insurance in the amount of at least \$3,000,000 combined single limit, naming the Willingboro Public Schools as additional insured and also furnish documentation of uninsured/underinsured motorist coverage with a limit of not less than \$3,000,000 combined single limit; and (2) copy of driver's most recent motor vehicle record which is on file with the transportation company and driver's license.

GRAND TOTAL COST OF TRIP: (Includes Cost and Bus) \$

FIELD TRIP RATIONALE MUST BE SUBMITTED

Approved: _____

Principal
Date

Approved: _____

Director/Department Head
Date

Approved: _____

Assistant Superintendent of Curriculum & Instruction
Date

AGENDA ACTION ITEM NUMBER:
(For Office of AS C&I /SBA Use Only)

DATE OF BOE APPROVAL: