



# Martin County Schools Field Trip Request

*Revised November 30, 2021*

<b>Request Date:</b>		<b>(Must Be Received 30 Days Prior to Trip Date)</b>	
<b>Trip Date:</b>		<b>Return Date:</b>	
<b>School:</b>		<b>Destination:</b>	
<b>Teacher(s) Requesting Trip:</b>			
<b>Grade Level of Students:</b>		<b>Number of Students:</b>	
<b>Number of Chaperones:</b>		<b>Number of Buses:</b>	
<b>Name of Driver(s):</b>			
<b>Wheelchair:</b> ___ Yes ___ No		<b>Child Seat Needed:</b> ___ Yes ___ No	
<b>Club/School Responsible for Payment:</b>			
<b>A brief explanation of the trip:</b>			
<b>The number of bagged meals being requested for the trip:</b>			
I, _____ (teacher), have attached my class roster for Child Nutrition to verify allergies in order to prepare meals.			
Principal _____ Approval ___ Denial			
Signature:		Date:	
Transportation _____ Approval ___ Denial			
Signature:		Date:	
Superintendent/Board _____ Approval ___ Denial			
Signature:		Date:	

**REQUESTS MUST BE RECEIVED BY THE TRANSPORTATION DIRECTOR 30  
SCHOOL DAYS PRIOR TO THE TRIP DATE**