2/28/12

Field Trip Authorization Form

Used for any field trip that will require students to travel over 100 miles one way and/or remain away from home overnight must be submitted to the Superintendent for approval prior to arrangements being made by the staff member involved. (Per Policy IICA)

Teacher/Advisor Name: Chambree Ku	umka school: SHS
Class or Activity: Dlympia Snow &	Women's Leadership Institute
Purpose of Trip: Introduction to the theme of the year and an	
Grade Level(s): 1th 12th No. of S	peers. 7 of 30 required contact
Date(s) of Trip: 9/29/22	
Destination(s): Choss Insurance	Center, Bangor, Maine
Method of Transportation: BUS	
Number of Chaperones including teacher/advisor:	
Will students be away from home overnight?	Yes X No
If Yes, explain accommodations:	
Funding Source: Dlympia Snowe Institute	
Has this field trip occurred in previous years? X Yes No	
CKunka Signature of Teacher/Advisor	8/29/22 Date of Submission
	8/23/2 010rd
Approval and Signature of Building Administrator	Date of Approval
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Submit to Superintendent two weeks prior to requested trip date	
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Approval and Signature of Superintendent	Date of Approval
School Committee Notified Date:	□ Notified Teacher/Advisor: Date:
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