CORVALLIS SCHOOL DISTRICT 509J

Field Trip Request Form

School_____ Date of Trip_____ Time_____ _____
departure return

Class/Group _____ Teacher/Designee _____

Destination _____ Destination Phone #_____

Purpose of Trip_____ Cell Phone # _____

Number of Students _____ Number of Adults _____

METHOD OF TRANSPORTATION (Check One)

☐ Walk ☐ City Bus ☐ Private Car ☐ School Bus ☐ School Van ☐ Other, please explain _____

If by **School Van or Private Car**, list driver(s) and students per driver (must be on file in school office **PRIOR** to departure).

Driver 1 _____ Driver 2 _____ Driver 3 _____

Driver 4 _____ Driver 5 _____ Driver 6 _____

If by School Bus, number of students per bus Number of adults per bus

PRIOR TO DEPARTURE:

Parent Permission form for each student must be completed
Permission for Use of Private Vehicle for each driver must be on file in office
Volunteer Background Check Application must be completed for each adult
School Van or Private Car Driver/Student List (goldenrod copy) must be on file in school office

_____ _____
Administrator/Designee Signature Date

Trips of more than 48 hours duration should be submitted on the **Extended Field Trip Request** form and submitted to the Assistant Superintendent for Instructional Services thirty (30) days prior to the trip; trips of less than 48 hours duration should be submitted fourteen (14) days prior to the trip; walking trips should be submitted prior to the trip.

At least one staff member with a current first aid card will accompany the field trip. This requirement may increase based on the number of students participating (one trained staff member/sixty students).

White: Instr. Services Yellow: Building Pink: Teacher Golden Rod: Building w/drivers assigned