

LEWIS CENTER FOR EDUCATIONAL RESEARCH FIELD TRIP REQUEST FORM

TRIP REQUEST FORM		Initials
Z AAE	NSLA	Transportation Boo
		Calendared:
		Initials:

Date Submitted: May 8, 2018			
Requested by: Sth Grade Team			
Destination: Town of Apple Valley pool	Phone: ext. 374		
Date(s) of trip: May 31, 2018 Thursday	Grade Level		
School departure time: //:30	Destination arrival time: 11:45 AM		
Destination departure time:	School Return Time: 2:30		
Overnight/Out-of-State stay: YES NO	Water activities involved: YES NO		
Number of students: 100 adults: 5	Admission students: no adults: no		
<u>Transportation</u>			
Bus requested? (circle one) YES NO	Bus company name: Ebymeyer		
Private Vehicle Used? YES NO	Bus company contact name: Molissa Brinson		
Proper Insurance Coverage? YES NO	Other Transportation:		
LCER Approved Driver? YES NO	ASB or Club Sponsored? (Paid by Club) YES NO		
PTC sponsored? (Paid by PTC) YES NO	Name of Club		
Brief Description of Educational Benefit to be Derived From this Activity:			
End of the year pool party. Pool closed at science camp.			
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have followed the checklist prior to submitting this form Teacher Signature			
Principal Signature:			
	51.1.		
Funding Code:	Date: 7 / 11 / 1.8		