

HILLSBORO COMMUNITY UNIT SCHOOL DISTRICT #3
HILLSBORO, ILLINOIS

FIELD TRIP/TRANSPORTATION REQUEST

All buses must return no later than 2:30, unless express permission is given. Drivers will determine when buses depart for return trip.

SCHOOL _____ DEPARTMENT/GRADE _____

TEACHER(S) _____

DATE OF TRIP _____ PLACE TO BE VISITED _____

PLACE OF DEPARTURE _____

NUMBER IN GROUP _____ DEPARTURE TIME _____ RETURN TIME _____

TIME YOU WISH TO ARRIVE AT YOUR DESTINATION _____

NUMBER OF BUSES REQUESTED (77 passenger/26 seat capacity) _____

HANDICAP ACCESSIBLE BUS REQUIRED ___ YES ___ NO

IS THE GROUP FINANCING ANY PORTION OF THE TRANSPORTATION ___ YES ___ NO

PURPOSE OF TRIP (INCLUDE EDUCATIONAL OBJECTIVES-RELATIONSHIP TO
PRECEDING AND FOLLOW-UP CLASS ACTIVITIES)

CURRICULUM AREA: _____

NAME OF ADULTS WHO WILL CHAPERONE

Teacher Signature _____ Date _____

For Administrative Use Only

Principal certifies that trip will be chaperoned by a full-time employee and all participating will have a trip clearance approval on file signed by the students' parents.

Principal _____

DATE _____

REVIEWED AND SCHEDULED
____ APPROVED ____ DENIED

District Administrator
DATE _____

APPROVED _____ DENIED _____

Please complete both sides and submit to the Unit Office for Approval.

TRIP CLASSIFICATION: Circle appropriate number.

1. Reimbursable Trip: This trip is on school time (8:15 a.m. to 3:15 p.m.) planned as an integral part of the instructional program OR this trip is to transport students following voluntary extracurricular and/or co-curricular activities including sports practices, club meetings, drama rehearsals, or choral and band practices immediately preceding or following the school day.

2. Non-Reimbursable Trip: This trip is a school sponsored activity such as interscholastic, interscholastic athletic or any other school sponsored non-curriculum related activity trip that does not require student participation as part of the educational services of the district, as part of the students' regular class for credit schedule OR all or part of the transportation costs are paid by any parents, students, or other organization.

Estimated Mileage Round Trip _____

Total Cost of trip _____