



DICKSON COUNTY SCHOOLS  
Field Trip Request

School \_\_\_\_\_ Sponsoring Teacher \_\_\_\_\_ Date \_\_\_\_\_

Description of Requested Event \_\_\_\_\_

Date(s) of Event \_\_\_\_\_ Location \_\_\_\_\_

Department \_\_\_\_\_ Number of Students \_\_\_\_\_

Number of Chaperones: Teachers \_\_\_\_\_ Parents \_\_\_\_\_ Others \_\_\_\_\_

How were students chosen to attend the event? \_\_\_\_\_

Explain the educational value of the planned trip. \_\_\_\_\_

An itinerary must be included for all overnight trips. Included Yes \_\_\_ No \_\_\_\_\_

How will the trip be financed? \_\_\_\_\_

What is the total cost per student? \_\_\_\_\_ What is the "out-of-pocket" cost per student? \_\_\_\_\_

What is the cost per chaperone? \_\_\_\_\_

How will the chaperone's trip be financed? \_\_\_\_\_

How will students be transported? \_\_\_\_\_

What will be expected of the students not attending? \_\_\_\_\_

Who will pay for the substitute teacher(s)? \_\_\_\_\_

Do the Chaperones for this trip account for male and female students? Yes \_\_\_ No \_\_\_\_\_

If NO, describe: \_\_\_\_\_

Principal's Approval \_\_\_\_\_ Date \_\_\_\_\_

Director's Approval \_\_\_\_\_ Date \_\_\_\_\_

Board Approval \_\_\_ Yes \_\_\_ No

Chairman of Board \_\_\_\_\_ Date \_\_\_\_\_

Board Stipulations \_\_\_\_\_