Red River Parish School Field Trip Form

School ____________________________________________________________

Organization/Group __________________ Number of Students ______________

Teacher(s) Submitting Request __________________________________________

Date (s) Bus Needed_________________ Destination ____________________

Time of Departure _________________ Time of Return_________________

Bus Driver__________________________________________________________

Educational Objective(s) of Trip _______________________________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

Principal’s Signature _____________________________ Date __________________

Principal’s Signature denotes Approval

Supervisor of Transportation _______________________ Date __________________

Approved ______________________________________ Date ________________

(Superintendent’s Designee)

Forms Must Be Submitted To the Proper Supervisor of Instruction At Least 5 Days Prior to Departure.....