



# Plainfield Board of Education

## Field Trip Information and Permission Request

This report is to be submitted to the Superintendent 30 DAYS IN ADVANCE of all field trips. An activity bus request form must be included with this request.

GROUP \_\_\_\_\_ SCHOOL \_\_\_\_\_

DESTINATION \_\_\_\_\_

NAME, ADDRESS & PHONE# OF FIELD TRIP LOCATION \_\_\_\_\_

\_\_\_\_\_

DATE(S) OF TRIP \_\_\_\_\_

OUT OF STATE YES NO

TIME OF DEPARTURE \_\_\_\_\_

TIME OF RETURN \_\_\_\_\_

TEACHER(S) \_\_\_\_\_

GRADE(S) \_\_\_\_\_

Phone# to be reached during school hours \_\_\_\_\_

Percent of total group \_\_\_\_\_

Ratio of Chaperones to Students \_\_\_\_\_

Cell phone# for after school/weekend trips \_\_\_\_\_

Number of student's involved \_\_\_\_\_

Ratio 1:15

Number of Chaperones \_\_\_\_\_

Reason for those not attending \_\_\_\_\_

What are the alternate instructional activities planned for those not attending? \_\_\_\_\_

\_\_\_\_\_

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

Have financial arrangements been made for students who are unable to pay? \_\_\_\_\_

Place to be visited? \_\_\_\_\_

Round trip miles? \_\_\_\_\_ Method of Transportation \_\_\_\_\_

\_\_\_\_\_

**ALL FIELD TRIPS MUST RETURN NO LATER THAN 2:00 P.M. IF YOUR TRIP MUST DEPART BEFORE 8:30 A.M. AND OR RETURN LATER THAN 2:00 P.M., YOU MUST OBTAIN BUS(ES) FROM AN OUTSIDE CONTRACTOR.**

**THERE WILL BE NO FIELD TRIPS ON HALF DAYS**

**WHEN USING A BOARD BUS...ALL TOLLS AND PARKING CHARGES ARE THE RESPONSIBILITY OF THE PERSON ARRANGING THE TRIP AND MUST BE GIVEN TO THE BUS DRIVER BEFORE DEPARTURE.**

**DISTRICT APPROVED BUS COMPANIES**

ACADEMY BUS	201-420-7000	AMAKER & PORTERFIELD	908-753-6423
DAPPER BUS COMPANY	732-283-1982	RARITAN VALLEY	732-549-1212
EAGEL ROCK	973-325-0037	SUBURBAN	800-222-0492
LAMON ENTERPRISES	732-940-7450	VILLANI BUS	908-862-3333

---

What is the purpose of the trip? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What objective(s) in NJCCCS does this experience address? Plus, CPI's. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What are the follow-up plans from the field trip? \_\_\_\_\_

\_\_\_\_\_

I certify that School Board policies have been complied with:

\_\_\_\_\_  
Principal's Signature

**DO NOT WRITE BELOW THIS LINE**

---

Action taken \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Assistant Superintendent Education Services

*Note: Permission slips and permission to treat emergency forms are expected to travel with the group.*

**Requirement: Lesson Plan must be attached to Board approval**

**Revised: 11/4/16**