

STEWART COUNTY SCHOOLS

Field Trip Plan
For
Out-of-State
and/or
Overnight Trips

Board approval is required. Please submit this plan 10 days before Board Meeting.

Teacher(s) Requesting Approval _____

Class/Group/Organization _____

Date of Trip _____ Destination _____

Trip Objective or Goal:

Detailed Itinerary: (Dates, times and activities)

Emergency and Safety Procedures:

List all teachers and chaperones

All teachers and chaperones attending must affirm and sign before approval will be granted

I affirm:

That I have read the board policy concerning field trips (code IFCB)

That all guidelines set forth in the board policy will be followed to the letter and intent

That this trip is educationally beneficial for students as required by board policy

That all school rules will be followed including those concerning the use of alcohol/drugs, and tobacco

That signed permission forms have been obtained on all students attending

Signature of teacher or chaperone

Signature of teacher or chaperone

Signature of teacher or chaperone

Signature of teacher or chaperone

Date of Board Approval _____

Principal

Director of Transportation

Supervisor

Director of Schools