

LOWNDES COUNTY SCHOOLS
Request for Field Trip and/or Bus Permit

IFCB
Revised August 2008

School _____ Date _____

Teacher _____ Grade/Class _____

Destination _____

Date of field trip _____ No. of school days/hours missed _____

Time/place of departure _____ Time/place of return _____

Purpose of field trip _____

Specific instructional objective that will be mastered as a result of this trip _____

No. of students _____ No. of chaperones _____ Substitute needed? _____

Route to be followed _____

Type of Transportation _____ Funding Source _____

Funding source account number _____

Safety council member _____

Supervising faculty member _____

Approved: Principal _____ Date _____

Superintendent: _____ Date _____

PAYMENT: (Driver completes this section)

Bus No. _____ Name of Driver _____ Last 4 digits of Soc. Sec. # _____

Permit Number _____ Beginning Mileage _____ Ending Mileage _____

Total Miles _____ Field Trip Start Time: _____ Field Trip End Time: _____

***Secretary/Bookkeeper Section:**

Total Hours for payment: _____ Total due to district @ \$1.00 per mile _____

Date: _____ Secretary/bookkeeper's signature _____

*If a school bus is used, The **driver must complete payment section** and the school secretary/bookkeeper must complete their section and sign the field trip form, and **give the bus driver a copy. Driver must attach their copy to their monthly timesheet for payment.** The school secretary/bookkeeper must enter a purchase order to reimburse driver and mileage to Lowndes County School District and send the completed field trip request form to the Superintendent's office.*

***State law mandates that the approved copy of this request must be in the driver's possession while traveling.**

***All out of state field trips must be approved by the Board and must be submitted ten days before the Board meeting.**

Field trips will no longer be approved retroactively. Faxed copies will not be processed. Send request forms to Superintendent's office.