

**HULL PUBLIC SCHOOLS
TRIP REQUEST**

Class Field Trip Co-Curricular Trip International Excursion

School: _____ Date Submitted: _____

Teacher(s): _____ Position(s): _____

Destination: _____

City/State: _____

Relevance of this trip to the curriculum: _____

Departure date: _____ Time: _____ Return Date: _____ Time: _____

Teacher/Administrator responsible: _____

Number of students: _____

Number of chaperones: _____ Ratio of students to chaperones: _____

Have chaperones completed a CORI? Yes No

Mode of transportation: _____

If private, drivers: _____

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ESTIMATED EXPENSES

Admission: _____

Cost of transportation: _____ Financial assistance available: Yes No

Other expenses: _____ Other sources of funding: _____

Total cost of trip: _____

Per student charge: _____

Please attach:

1. Itinerary
2. Pre and post field trip activities
3. Other descriptive information

Principal approval: _____ Date: _____
(Signature)

*Superintendent's approval: _____ Date: _____

*School Committee approval: _____ Date: _____

* Approval necessary for all out-of-state field trips, all school-sponsored late night or overnight field trips (in or out of state), all school-sponsored international field trips.

First reading: September 27, 2004
Second reading: November 08, 2004
Adoption: November 22, 2004
Proposed reconsideration: November, 2009