PRINCETON JOINT UNIFIED SCHOOL DISTRICT 473 State Street PRINCETON, CA 95970

		<u>FI</u>	<u>ELD TRIP</u>	<u>REQUEST</u>		
REQUESTED BY:				SITE:	Elementary	Jr./Sr. High
DESTINATION:						
CHARGE FIELD TRIP TO:						
DATE OF PLANNED FIELD TRIP						
DATE(s):				DAY(s) OF THE WE	EEK:	
GRADE/CLASS/ORGANIZ		# OF STU	JDENTS / ADULTS:	/		
DEPARTURE TIME:		RET	URN TIME:			
CHAPERONES:						
•		Per Child		Per Adult	Other:	
TOTAL AMOUNT THAT IS	STUDENTS	RESPONSI	BILITY:			
SUBSTITUTE TEACHER REQU					K LUNCHES REQUIRE	
PLEASE MAKE SURE TO PUT	YOUR REQUE	EST IN AESOP		If Yes - Total # o	f Sack Lunched Need	ded?
		TRANSPO	DRTATION	I REQUIREMEN	<u>TS</u>	
TRAVEL NEEDS:	BUS					
	VAN 2	VAN 3	VAN 4			
Special Instructions if Any:	7,1142	V/11 C	77.07			
Special instructions if Arry.						
			APPRO	VALS:		
				Companiento en el o est/l	Drive single Cierce Street	Data
				Superintendent/i	Principal Signature	Date
		** DIS	TRICT OFFI	CE USE ONLY **		
TOTAL TRIP CHARGE:	\$	A	CCOUNT RE	ESPONSIBILITY:		

NOTE: Site office must receive a copy of all permission slips one day before departure and actual student list on the day of trip.

Field Trip Request Routing:

¹⁻Form Completed 2-Forward to Superintendent/Principal for Approval 3-Copy Cafeteria 4-Copy Transportation Dept.

⁵⁻Copy Business Office 6-Copy District File 7-Add to school calendar