

**FIELD TRIP REQUEST**

CAMPUS\_\_\_\_\_ DATE OF REQUEST\_\_\_\_\_

NAME\_\_\_\_\_

Purpose of Field Trip\_\_\_\_\_

Destination\_\_\_\_\_

Dates of Field Trip: From\_\_\_\_\_ through\_\_\_\_\_

School Days Involved\_\_\_\_\_ Estimated Distance\_\_\_\_\_ (miles round trip)

Non-School Days Involved\_\_\_\_\_

ESTIMATED EXPENSES

REASON FOR ATTENDING

Registration \$\_\_\_\_\_ \_\_\_\_\_

Transportation \$\_\_\_\_\_ \_\_\_\_\_

Other \_\_\_\_\_ \$\_\_\_\_\_ \_\_\_\_\_

\_\_\_\_\_ \$\_\_\_\_\_ \_\_\_\_\_

TOTAL \_\_\_\_\_

REQUESTOR SIGNATURE\_\_\_\_\_

\_\_\_\_\_ Department

\_\_\_\_\_ Dean Signature

Approved\_\_\_\_\_ Disapproved\_\_\_\_\_

COMMENTS\_\_\_\_\_

Please Note: Each participant will need to fill out and return the [SSCC Field Trip Waiver of Liability / Hold Harmless Agreement Form](#).