



FIELD TRIP REQUEST FORM

FIELD TRIP INFORMATION

All requests must be submitted 4 weeks in advance and must be signed by the Principal and sent to Transportation before approval from the Superintendent of Schools or their designee. Once approved, the Transportation Department is notified and an email is sent to school and teacher. Please return when completed to the Transportation Department for filing and payment. All trips must be back by 2:15 unless prior approval.

School <input type="checkbox"/> Early Childhood Program <input type="checkbox"/> Lee F. Jackson Elementary School <input type="checkbox"/> Highview Elementary School <input type="checkbox"/> Richard J. Bailey Elementary School <input type="checkbox"/> Woodlands Middle High School <input type="checkbox"/> Other:	Departure Time	Returning Time
	Grades	
	Date of Trip	
Destination	Number of Students	Special Needs
Address	Wheelchair	Chaperones
	Total on trip	
	Principals Approval <input type="checkbox"/> Yes <input type="checkbox"/> No	Student List Attached <input type="checkbox"/> Yes <input type="checkbox"/> No
	Chaperone List Attached <input type="checkbox"/> Yes <input type="checkbox"/> No	Educational Summary Attached <input type="checkbox"/> Yes <input type="checkbox"/> No

Teacher Name _____ Teacher Signature _____ Date _____

Principal Name _____ Principal Signature _____ Date _____

TRANSPORTATION ONLY: Price before sending to Superintendent

Number of Buses	Number of Vans	Funds in Budget Code <input type="checkbox"/> Yes <input type="checkbox"/> No	PO Number	Price	Yonkers Office <input type="checkbox"/> Yes <input type="checkbox"/> No	Greenburgh Office <input type="checkbox"/> Yes <input type="checkbox"/> No
Sent for payment	Invoice Number	Amount	Transportation Director		Signature	

SUPERINTENDENT OR DESIGNEE ONLY

Application for trip approved <input type="checkbox"/> Yes <input type="checkbox"/> No	Chaperone list approved <input type="checkbox"/> Yes <input type="checkbox"/> No	BOE Approval Needed <input type="checkbox"/> Yes <input type="checkbox"/> No
Name _____	Signature _____	Date _____



**Greenburgh Central
School District**
Our Children. Our Focus. Our Future.



Transportation
2023 - 2024

T: 914.949.0275
E: yellowbus@greenburghcsd.org

Dr. Linda J. Iverson
Superintendent of Schools

FIELD TRIP REQUEST FORM

STUDENT LIST		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHAPERONE LIST		