

**Arthur Community Unit School District 305**  
**Field Trip Request Form**

Date: \_\_\_\_\_

Teacher Name(s): \_\_\_\_\_ Class: \_\_\_\_\_

Destination: \_\_\_\_\_

Bus Required: Yes    No    Total Number of Students Attending: \_\_\_\_\_

Number of Students who **regularly ride a bus route** in am and pm: \_\_\_\_\_

Date of Field Trip: \_\_\_\_\_

Departure Time: \_\_\_\_\_ Return Time: \_\_\_\_\_

Purpose of the trip: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Teacher Signature: \_\_\_\_\_

Approved: \_\_\_\_\_

*Principal*

Approved: \_\_\_\_\_

*Superintendent*

**\*A class roster including whether or not students are regular bus riders must be printed (STI) and taken on each trip to mark off students who actually attend the trip.**

**\*\*Once Field Trip is approved, the building principal will forward the trip information on to Jared Vanausdoll to have the bus approved and scheduled.**