

**Attleboro School Department
Overnight/International Field Trip Proposal**

Academic **Extracurricular**

School(s):	Trip Coordinator:	Date:
Grade/Class:	# of Students:	# of Chaperones:
		Ratio:

Destination(s):	Date(s):	Distance:
Educational Justification:	Chaperone List:	

Type: Superintendent's approval, three weeks prior, less than 75 miles
 School Committee approval, three weeks prior, more than 75 miles
 Concept Approval four to six months in advance of proposed trip

Transportation By:	Insurance:
Leaving Time:	Pickup:
Returning:	

Cost Per Student

Admission:	Funding Sources:
Transportation Cost:	
Other Cost:	Total Funds:
Total Cost To Student:	Net Cost To Student:

Approvals

Requested By:	Date:
Principal:	Date:
School Nurse:	Date:
Superintendent:	Date:
School Committee Approval/Denied:	Date:
I have read and understand the Field Trip Policy IJOA	Initial