

Added to BOE Spreadsheet

**OXFORD CITY SCHOOLS**  
**Oxford, Alabama**  
**20\_\_ - 20\_\_ REQUEST FOR:**

- Co-curricular - Administrator assigned:** \_\_\_\_\_  
 **Field Trip – Administrator assigned:** \_\_\_\_\_  
 **Athletic Trip**  **Out of State**

**This form along with an attached copy of the lesson plan, which aligns the trip destination and experiences with the Alabama Course of Study, must be submitted to the Central Office by the 20<sup>th</sup> day of the semester in which the field trip is requested.**

**NAME OF SCHOOL** \_\_\_\_\_

**NAME OF GROUP MAKING TRIP** \_\_\_\_\_

**Summation of Course of Study requirements for trip:** \_\_\_\_\_  
\_\_\_\_\_

**Lesson Plan Must Be Included For Field Trips Before Submitting To Principal.**

\_\_\_\_\_  
**Sponsor's Signature**

\_\_\_\_\_  
**Date Requested**

\_\_\_\_\_  
**Principal's Signature**

\_\_\_\_\_  
**BOE Approval**

**Lesson Plan Attached and Approved**

**NURSE REQUESTED FOR THIS TRIP**  \_\_\_\_\_

\_\_\_\_\_  
**Nurse Signature**

**DESTINATION** \_\_\_\_\_

**DATE OF DEPARTURE** \_\_\_\_\_

**TIME OF DEPARTURE** \_\_\_\_\_

**DATE OF RETURN** \_\_\_\_\_

**TIME OF RETURN** \_\_\_\_\_

**LOADING TIME** \_\_\_\_\_

**LOADING LOCATION** \_\_\_\_\_

**NUMBER BEING TRANSPORTED** \_\_\_\_\_

**NUMBER OF BUSES** \_\_\_\_\_

\_\_\_\_\_  
**Transportation Supervisor's Signature**

\_\_\_\_\_  
**Superintendent's Signature**

**NOTE: Transportation Supervisor will assign bus driver(s). Date Assigned** \_\_\_\_\_

**Bus Driver:** \_\_\_\_\_ **Bus #** \_\_\_\_\_ **Phone#** \_\_\_\_\_

**Bus Driver:** \_\_\_\_\_ **Bus#** \_\_\_\_\_ **Phone#** \_\_\_\_\_

**Bus Driver:** \_\_\_\_\_ **Bus#** \_\_\_\_\_ **Phone#** \_\_\_\_\_