

## 🌉 MJUSD Field Trip Request

FOR OFFICE USE ONLY
RECEIVED
RETURNED
AGENDIZED

То	day's date:	Date(s) of Field Trip:	Destination:		
Sc	hool:	Depart from school:	Arrive back to scl	nool:	
Name of field trip or group going: Number of students go					
Ту	pe of Field Trip (circle	all that apply): Partial Day Full Day	Overnight Out-of-State Academic	Incentive (non-instructonal time only)	
		☐ MJUSD Carryall ☐ Private Cha			
<b>Tr</b> o App eac	ansportation:  Privalent Description  Privale	t be arranged by Transportation to ensure apwate Car: A Non-sponsored Transportation to the Car: A Non-sponsored Transportation and a copy of insurance uired timelines. Private Driver Applications of king School Vehicle	on Notice is required for each child. A verification must be submitted with this F	completed Private Driver ield Trip Request Form for	
		pplemental insurance. Field trip insurens email to this field trip request form.			
Est	timated number of lur	nches to be provided through the M	JUSD Nutrition Services Departm	ent:	
	•	ircle the chaperones cleared throug		se attach a separate	
Cui	rrent District Employ	ee Chaperone(s):			
		Fingerprinted and TB Cleared Chape ve. Please attach a separate sheet i	•	ared through	
		o chaperone ratio is 10:1. Student to academic learning time, describe how	•	·	
		cannot be duplicated with the same e			
<b>Pri</b> 1.		ne fieldtrip will have a signed Voluntary Ex office 5 days prior to the date of the fiel		Authorization-Minor form	
2.		ve a Voluntary Excursion/Field Trip Notice		•	
3.	All Chanerone(s) have f	ingerprint clearance for the field trip date	e(s) and are on file in Personnel	□ Yes □ No □ Yes □ No	
4.		urrent TB test clearance for the field trip		☐ Yes ☐ No	
5.	•	the school with a complete first aid kit. E		☐ Yes ☐ No	
6.	No pupil shall be prever	o pupil shall be prevented from participating in the voluntary field trip or excursion because of lack of sufficient funds. EC35330			
7.	This field trip provides	appropriate California grade-level academ	ic standards that cannot be duplicated w	☐ Yes ☐ No with the same emphasis to	
٠.	learning in the classroom		ie grandal ag mar earner ge adpricared i	☐ Yes ☐ No ☐ N/A	
8.	If using private car, ea	ch child has a Non-Sponsored Transportat		□ Yes □ No □ N/A	
9.	Name(s) of drivers:	vate Driver Application is attached to this	s form.	☐ Yes ☐ No ☐ N/A	
	All Fieldtrip Request Fo The Field Trip Request	rm requirements will be met. Form is complete.		□ Yes □ No □ Yes □ No	
Rec	quests must be turned in	n to the Educational Services 15 busines d requests must be submitted no less th		•	
 Prii	ncipal's Signature	 Date	D.O. Representative's Signature	Date	