

# Field Trip Request



South Williamsport Area  
School District  
515 West Central Ave.  
South Williamsport, PA  
17702  
Phone: 570-327-1581  
Fax: 570-326-0641  
www.swasd.org

Teacher:

Grade / Club

Building

Date of Application

## General Information

Place to be Visited

Date of Visitation

Number of Students

Number of Faculty

Additional Chaperones

## Transportation

Transportation Needs

Departure Time

Time Leaving Destination

**Explain how this trip is related to specific course objectives or will enhance other learning outcomes:**

**Additional information if needed:**

## Fees

Admission Fees (\$)

Funding Source for Admission

Funding Source for Transportation

## Substitute Coverage

**Number and duration of coverage needed:**

Is this an out of state trip?

Is this an overnight trip?

## Approval / Signature Required

Principal:

Superintendent:

**School board approval is required for all overnight and/or out of state trips.**