

UCHS EVENT/FIELD TRIP FORM

For School Faculty and Staff

Use to reserve a day/time on the calendar for events/field trips, etc.
Only list one event/field trip per form.

ALL OVERNIGHT TRIPS MUST BE BOARD APPROVED

Name of Person/Sponsor planning Event/Field Trip: _____

Name of Club/Group (if applicable): _____

I/We requests permission to have the following event/field trip:

Name of Event/Field Trip : _____

Location of Event/Field Trip: _____

Date(s) Event/Field Trip _____ Time(s) of Event/Field Trip: _____

Facility Needed (if applicable): _____

Time(s) facility will need to be reserved for (if applicable): _____

Transportation Needed (if applicable): _____

Cost of Event/Fieldtrip: _____

Who will pay for Event/Field Trip: _____

Person(s) responsible for set up/clean up/chaperoning (if applicable):

Sponsor's Signature: _____

Date: _____

Time: _____

(For office use only)

Approved _____

Disapproved _____

Principal's Signature: _____ Date: _____

(if applicable) Email sent to be placed on agenda: _____

(if approved) Updated online calendar: _____ Sponsor Informed: _____