

Milton Public Schools
Field Trip **Preliminary** Approval Request
(To be submitted to Principal)

Name of Field Trip Coordinator: _____ Date: _____

Student Group Participants: _____

1. Educational Objectives of the Field Trip

2. Description of How the Safety of Students will be Maintained

3. Proposed Budget Including Cost to Students and Sources of Finances (Including Fundraising)

4. Estimate of the Number of Students and Adults Participating

5. General Plan or Schedule for the Field Trip (Including Number of School Days Missed)

6. Procedures for Emergency Notification to Superintendent and Parents in the Event an Emergency Should Occur

7. Procedures for Students to use if Separated from Group

8. Nursing Services for All Students Less than High School Age