

Sacramento City Unified School District
FIELD TRIP REQUEST FORM
USE A SEPARATE FORM FOR EACH TRIP

[Redacted content]

11-21-19
Date 11-21

School Name

Date 11 / 17 / 2019

Teacher Name

Room # Telephone

[Redacted content]

TRAVEL REQUEST

School Name _____ Date 1 / 9-12 / 2020

Teacher's Name _____ Room # _____ Telephone _____

Field Trip Destination Gonzaga University, Spokane,

Reason for travel Debate _____ nt _____

List unusual activities, water activities or high risk activities (examples: rafting, snorkeling, rock climbing, skiing, etc.) as a special parent waiver may be required. Submit copy of contract or waiver to Risk Management for review before signing. Attach a detailed itinerary for each day

Signed _____

Approvals:

P