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**Field Trip Request Form**

Completed form must be submitted at least **5 working days prior** to the scheduled trip.

Email is an acceptable method of submission for all in-county requests.

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| **Date:** |       |

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| **Trip Information** |
| **Requester's Name:**      | [ ]  **Day Trip – List Date:**      [ ]  **Multiple Days – List Dates:**      **Note: For out-of-county field trips, a Request for Travel must accompany the Field Trip Request Form.** |
| **Destination Including Address:**      |
| **Instructional Purpose:**      | **Emergency Telephone at Destination:**(     )       -       **Ext.**       |
| **College Vehicle Required:** **[ ]  No****[ ]  Yes [If yes, please contact Plant Operations (x8-8228) to reserve a vehicle. Drivers must have a current Driver Privacy Protection Act Authorization form (FTCC Form M-11) on file.]** |
| **List of Participating Students: (For classes, list course and section # and attach roster)**      |

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| **Approvals**(Approval for on-campus field trips requires Program Coordinator or Department Chair approval only.) |
|  |       |  | [ ]  **Approved** |       |  |
|  | **Program Coordinator** |  | **[ ]  Unapproved** | **Initials / Date** |  |
|  |       |  | [ ]  **Approved** |       |  |
|  | **Department Chair** |  | **[ ]  Unapproved** | **Initials / Date** |  |
|  |       |  | [ ]  **Approved** |       |  |
|  | **Division Chair** |  | **[ ]  Unapproved** | **Initials / Date** |  |
|  |       |  | [ ]  **Approved** |       |  |
|  | **Program Area Dean** |  | **[ ]  Unapproved** | **Initials / Date** |  |
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| **Distribution:**Dean Department Chair / Program CoordinatorDepartment Secretary | Division ChairEvening & Weekend Programs Director (if applicable)Security |