

## BILLINGS PUBLIC SCHOOLS Out-of-State Field Trip Application

Date: \_\_\_\_\_

Instructor: \_\_\_\_\_

Organization: \_\_\_\_\_

Type of Trip: \_\_\_\_\_

Destination: \_\_\_\_\_

Date of Trip: \_\_\_\_\_

School Days Missed: \_\_\_\_\_

No. of Students: \_\_\_\_\_

No. of Chaperones: \_\_\_\_\_

Estimated Expenses:

Mode of Transportation: \_\_\_\_\_

Cost: \_\_\_\_\_

Lodging (Type): \_\_\_\_\_

Cost: \_\_\_\_\_

Meals: \_\_\_\_\_

Cost: \_\_\_\_\_

Misc.: \_\_\_\_\_

Cost: \_\_\_\_\_

Total Estimate: \_\_\_\_\_

Cost per Student: \_\_\_\_\_

Educational value and reason for taking trip: \_\_\_\_\_

Methods of fund raising: \_\_\_\_\_

Cost to School District: \_\_\_\_\_

Principal: \_\_\_\_\_

Date: \_\_\_\_\_

Director/Sponsor: \_\_\_\_\_

Date: \_\_\_\_\_

Route: Principal: \_\_\_\_\_

Superintendent: \_\_\_\_\_

Board of Trustees: \_\_\_\_\_

**APPLICATION MUST BE PRESENTED AT REGULAR SCHOOL BOARD MEETING AT LEAST 45 DAYS PRIOR TO THE TRIP.**