

**SCHOOL DISTRICT OF WESTFIELD
Field Trip Request Form**

6062

4 copies

District Office Building Office Transportation Director Requester

Request must be submitted for approval 14 days prior to date of trip.

Date of Trip _____ Date Submitted _____

Trip Requested by _____

Departure Location Coloma Elementary Neshkoro Elementary Oxford Elementary
 Westfield Elementary WAHS WAMS Other _____

Destination _____

Leave Time _____ AM PM Return Time _____ AM PM

Special Instructions for Driver _____

Purpose of Trip _____

Cost per Student \$ _____

Number of Students _____ Number of Adults _____

Source of Funding _____

For field trip verification please visit www.westfield-bus.org

OFFICE USE ONLY

Approved Denied _____
Building Principal Date

Reason if Denied _____

Approved Denied _____
Transportation Director Date

Reason if Denied _____

of Buses _____

Driver(s) _____