



**Kingsley Area Schools**  
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**Joshua Rothwell, Superintendent**  
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**Brittany Moen, Executive Secretary**  
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### FIELD TRIP REQUEST FORM

DATE: \_\_\_\_\_ TEACHER'S NAME: \_\_\_\_\_

GRADE(S): \_\_\_\_\_ NUMBER OF STUDENTS ATTENDING: \_\_\_\_\_

DATE OF TRIP: \_\_\_\_\_ NUMBER OF BUSES/VANS REQUESTED: \_\_\_\_\_

DEPARTURE TIME: \_\_\_\_\_ RETURN TIME: \_\_\_\_\_

**\*ALL FIELD TRIPS MUST RETURN BY 2:30 P.M. UNLESS AUTHORIZED BY THE SUPERINTENDENT AND TRANSPORTATION DIRECTOR**

DESTINATION: \_\_\_\_\_

ADDITIONAL ACCOMMODATIONS REQUESTED? EXPLAIN BELOW:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Teacher's Name (signature)

\_\_\_\_\_  
Principal (signature)

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

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\*Do not write below this line - Admin Use Only

- TRIP APPROVED
- TRIP DENIED

REASON FOR DENIAL: \_\_\_\_\_

ADDITIONAL ACCOMMODATIONS APPROVED? Yes [ ] No [ ]

\_\_\_\_\_  
Transportation Director (signature)

\_\_\_\_\_  
Superintendent (signature)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date