

Lafayette Field Trip Permission Form (to be used when class time will be missed)

Student name _____

Purpose of field trip _____

Field Trip Date /Time _____

Field Trip Teacher _____

Teachers, Please sign and comment if student is failing, has missing assignments, etc

A-day teachers

B-day teachers

	<u>Signature</u>	<u>Comments</u>		<u>Signature</u>	<u>Comments</u>
1 st	_____	_____	1 st	_____	_____
		_____			_____
2 nd	_____	_____	2 nd	_____	_____
		_____			_____
3 rd	_____	_____	3 rd	_____	_____
		_____			_____
4 th	_____	_____	4 th	_____	_____
		_____			_____

Based on review of signatures and comments above, _____

does/does not have my permission to go to _____
(circle one)

with _____ on _____
(teacher) (date).

Parent/Guardian signature _____

This form should be returned to teacher by _____
date

Students transported by private vehicles are NOT covered by Board of Education liability insurance.