**Continuing Education 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.

# Date:

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| **Trip Information** |
| **Requester’s Name:****Destination Including Address:**  | **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.** |
| **Instructional Purpose:** | **Emergency Telephone at Destination:****Ext.** |
| **College Vehicle Required:** NoYes (If yes, please contact Business Office-Travel to reserve a vehicle. Driversmust be on the approved driver list kept by the Director of Campus Operations. |
| **List of Participating Students: (For classes, list course and section # and attach roster).** |

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| **Approvals**(On-campus field trips requires Instructor or Continuing Education Director/Coordinator approval only). |
| ApprovedInstructor Unapproved Initials/Date ApprovedContinuing Education Director/Coordinator Unapproved Initials/DateApprovedVP of Continuing Education Unapproved Initials/Date |

**Distribution:**

Instructor

Continuing Education Director/Coordinator VP of Continuing Education

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