



Instructor Name _____
(PLEASE PRINT) LAST NAME FIRST NAME

Course Number and Section _____
(REQUIRED)

FIELD TRIP INFORMATION:

FIELD TRIP DESTINATION _____

FIELD TRIP DATE _____

START TIME _____

END TIME _____

ADDITIONAL INFORMATION:

(SPECIFIC INSTRUCTIONS, PHONE NUMBERS, ETC.)

Were the students notified? YES NO

Instructor Signature

Date