## **SOLVAY SCHOOLS**

Solvay Union Free School District Office Of the Board Of Education PO Box 980 Syracuse, NY 13209 – 0980

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## Field/Class Trip Request

Location of field trip:		
Yes No Is the field trip lo required. If no, principal approval o		ga County? If yes, Superintendent approval is
Proposed Activity* (Rationale):		
Teacher(s) making request		Date
Date of field trip	_ Time Leaving	Time returning
Number of students going		Grade Level(s)
_		(Please submit transportation request.)
Other staff supervising		
	4 : El 4: 9 X	
Does the field trip qualify for A	rts in Education? Yes	L No L
Coordinator/Content Specialist appr	roval	Date
Principal approval		Date
(Required only for out of Onondaga Cour Superintendent's approval	nty field trips.)	Date

\*Please include itinerary.