SOLVA	Y SCH	IOOLS
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Solvay Union Free School District Office of the Board of Education PO Box 980 Syracuse, NY 13209 – 0980

PHONE: (315) 468-1111 FAX: (315) 468-2755 www.solvayschools.org

Field/Class Trip Request

Location of field trip:

Yes No Is the field trip located *outside* Onondaga County? If yes, Superintendent approval is required. If no, principal approval only. Proposed Activity* (Rationale): Teacher(s) making request_____ Date_____ Date of field trip Time Leaving Time returning Number of students going_____ Grade Level(s) Transportation needs (*Please submit transportation request.*) Teacher(s) supervising_____ Other staff supervising Does the field trip qualify for Arts in Education? Yes \Box No \Box Coordinator/Content Specialist approval_____ Date Principal approval Date (Required only for out of Onondaga County field trips.) Superintendent's approval Date *Please include itinerary.

KEVIN DWYER,, Vice President STEPHEN P. ZALEWSKI, Assistant Clerk

JAY TINKLEPAUGH Superintendent of Schools (315) 468-1111

JESSICA WHISHER-HEHL Assistant Superintendent for Educational Services (315) 468-1111

KAREN HENRY Assistant Superintendent for Business (315) 468-4942