

SBHS FIELD TRIP APPROVAL/PERMISSION FORM

It is the **STUDENT'S RESPONSIBILITY** to have this form completed and returned to the teacher in charge of the field trip **PRIOR** to the day of the trip.

Print Student's Name: _____

Activity/Class: _____

Date of Activity: _____ **Transportation:** _____

Departure Time: _____ **Return Time:** _____

Teacher in Charge of Field Trip: _____

CLASSES THAT WILL BE MISSED	TEACHER'S SIGNATURE/APPROVAL
Blue 1	
Blue 2	
Blue 3	
Blue 4	
Gray 1	
Gray 2	
Gray 3	
Gray 4	

1) I agree to make up class work, including tests or quizzes, missed as a result of attending this field trip. It is my responsibility to arrange makeup work with my teachers.

Student's Signature

Date

2) Parent/Guardian Approval: My son/daughter has my permission to participate in this activity.

Parent/Guardian's Signature

Date

Signature of Teacher (in charge of trip)

Date