

**LLOYDMINSTER PUBLIC SCHOOL DIVISION
FIELD TRIP APPROVAL FORM**

The Assistant Director of Education must receive form thirty (30) days in advance of Field Trip date.

School: _____

Destination: _____

Supervisors: _____

Class Involved: _____

Number of Students: ____

Traditional Curricular Field Trip: Yes ____ No ____

Itinerary: Departure Date, Time & Location: _____

Destination: _____

Return Departure Date, Time: _____

Complete Agenda of Activities: _____

Curriculum Alignment: _____

Student Costs: _____

Principal Signature: _____ **Date:** _____

ASSISTANT DIRECTOR APPROVAL:

Date Received: _____

Date Authorized: _____

Approval: Not Granted: _____

Granted without Funding: _____

Granted with Funding: _____