

Foreman School District Event / Trip request form

(to be filled out for all student events, teacher events, meetings, or conferences)

Name of event _____
Please select
 Student event - Name of group: _____
 Employee(s) only

Event Date _____ Event Time _____ Employee / Sponsor Name _____ Purpose of trip _____

Place of event _____ Departure Time _____ Return Time _____

Please check additional items needed

Requesting a Bus or Mini Bus _____
of students: _____ (Signature of Trans. Dir.) _____ (Driver Assigned) _____

Requesting a school vehicle Vehicle determined by supt: _____

Event Registration (Registration form MUST BE COMPLETELY FILLED OUT)

Please register me I have already registered

Motel Room: Employee must fill in motel information, or form will be returned to you

Room needed for _____ night(s) Check in _____ Check out _____

of people in room _____ Smoking Non-Smoking

Name of Motel _____ Address _____ Phone Number _____

Additional Motel Room / Instructions _____

Meals Reimbursed: You must return ALL itemized receipts in order to be reimbursed: Day Trips are not reimbursable.

Items will be reimbursed by: District Co-op Other _____

Employee Signature _____ Principal's Signature _____ Superintendent's Signature _____

Date: _____

Approved

Denied

Date: _____

Approved

Denied

Date: _____

**If submitting several events to simply be added to the school calendar, please attach a list with information for each date.*

FOR OFFICE USE ONLY

Workshop Registration Made _____ (date) Check # _____

Motel Reservation Made _____ (date) Confirmation # _____