

## Field Trip Check-Off Log

**Please fill out and return this form to the office before you leave for your trip. Each teacher MUST complete one of these forms for their class.**

Date: \_\_\_\_\_

Teacher: \_\_\_\_\_

Cell number that can be contacted while you are away: \_\_\_\_\_

Destination: \_\_\_\_\_

Departure time: \_\_\_\_\_ Return time: \_\_\_\_\_

Mode of transportation: \_\_\_\_\_

Total students **going**: \_\_\_\_\_ (*note: you must have a signed permission slip for all students going*)

Total students **NOT going**: \_\_\_\_\_ (*please leave a list of students who are not going and whose classroom they will be in while staying at school*)

Number of IAs going: \_\_\_\_\_

Number of parent chaperones going: \_\_\_\_\_

**Make sure you have the below items with you:**

Wrist bands for each student

Bag lunches

First aid kit

Asthma inhaler (if needed)