

PINELLAS COUNTY SCHOOLS
VISUAL ARTS FIELD TRIP FUNDING REQUEST

Today's Date: _____

All requests need to be submitted four (4) weeks in advance.

Pony to: Visual Art Office, Administration Building or Fax to 588-5176

School: _____ Cost Center: _____

Teacher Name: _____

Teacher e-mail: _____

Number of Students: _____ Number of Adults: _____

Trip Date: _____ (one date per form)

~~Pinellas County School Bus Yes _____ No _____ (Pinellas County School Bus is \$10.15 and \$1.00)~~

~~Private Bus Company Name: _____ Cost: _____~~

~~Pick-up Time: _____ Return Time: _____~~

Museum 1: _____

~~Admission Fee Cost per student: _____ Cost per adult: _____ Total Admission Cost: _____~~

~~**Museum 2:** _____~~

~~Admission Fee Cost per student: _____ Cost per adult: _____ Total Admission Cost: _____~~

Purpose of Field Trip: _____

Post Field Trip Activities: _____

Teacher Signature _____ Date _____

Principal Signature _____ Date _____

Art Supervisor Signature _____ Date _____