

PINELLAS COUNTY SCHOOLS
Teaching and Learning Content-Area
Field Trip Funding Request

Today's Date: _____

Teaching and Learning Field Trip Funding process must be followed, and this request submitted at least four (4) weeks in advance of trip.

Scan and email this form along with all required supporting documents to: Heather Rochkind rochkinds@pcsb.org

School Name: _____ Cost Center _____

Teacher Name: _____ Grade Level: _____

Teacher email: _____

Field Trip Location: _____

Trip Date: _____

Number of Students: _____ **Number of Adults:** _____

Pinellas County School Bus YES _____ NO _____ (pick up and return must be between 10:15-1:00)

Private Bus Company Name: _____ Bus
Cost: _____

Pick-up Time: _____ **Return Time:** _____

Admission Fee - Cost per student: _____ **Cost per adult:** _____ **Total Admission Cost:** _____

Purpose of Field Trip: _____

Teacher Signature: _____ Date _____

Principal Signature: _____ Date _____

Teaching and Learning _____ Date _____