



North Tippah School District



20821 Hwy 15
Falkner, MS 38629
662-837-8450
Fax # 662-837-8455

Request for Educational Field Trip

Name of trip: _____ School: _____

Organization, Class, or Program Name: _____ Grade: _____

Trip Location: _____ Date: _____

Events & Activities of Day:

Educational Objectives:

Teacher Responsible: _____

Chaperone: _____

Bus Driver: _____

*This form must be completed by the teacher and turned in to the principal two weeks prior to the trip.

_____ Approved _____ Not Approved

Signature of Principal: _____ Date: _____

Signature of Transportation Director: _____ Date: _____

***Reminder – Any out-of-state or overnight field trips must be board approved.**