

**PLEASANTVILLE PUBLIC SCHOOLS**  
**Pleasantville, New Jersey**

**OVERNIGHT FIELDTRIP FORM**  
**(All overnight field trips must be approved by chain of command,**  
**then the Board of Education)**

School:  
Name of Group:  
Destination:  
Brief Description and Purpose:

Number and Dates of School Days:

Method of Transportation:

# of Students  
# of Chaperones

Cost per student  
Cost per chaperone  
Amount being charged to students  
Amount fundraising  
Amount charged to Board of Ed

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Trip Coordinator:

Activities Coordinator:

Principal: \_\_\_\_\_

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Superintendent of Schools \_\_\_\_\_

Business Administrator \_\_\_\_\_

Board of Education Approval Date: \_\_\_\_\_

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