

**Field Trip/Transportation/Professional Leave Routing Form**

Teacher Name: \_\_\_\_\_ Date: \_\_\_\_\_

*This routing form must accompany your Field Trip/Transportation/Professional Leave packet.*

**Route Form for Teachers**

Signature required below for funding approval:

**Funding for Trip:**

**IF USING:** (check box below that applies)

Tax Credit (526)       Auxiliary (525)       Student Activity (850) (**attached minutes required**):

See Bookstore Manager: \_\_\_\_\_  
Bookstore Manager Signature

**If using:**  M&O     Gift Fund

See School Administrative Assistant \_\_\_\_\_  
Admin Signature

If using **Athletic Funds:**

See Athletic Administrative Assistant: \_\_\_\_\_  
Admin Signature

**\*\*Printout of account balance must be attached as proof of available funding\*\***

Designated Site Principal to complete below:

Professional Leave approved       Field Trip Approved       Transportation Approved

Date sent to District Office: \_\_\_\_\_

Date Approved/Rec'd back from District Office: \_\_\_\_\_

Scanned to: \_\_\_\_\_ Date: \_\_\_\_\_

Scanned to: \_\_\_\_\_ Date: \_\_\_\_\_

All Forms completed, approved By: \_\_\_\_\_ Date: \_\_\_\_\_  
Assistant Principal Signature

Submit packet to Field Trip/Transportation Coordinator when all forms have been completed and approval signatures have been obtained.