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Clear Form

SAN JOAQUIN DELTA COLLEGE

Maintenance & Operations

Field Trip, Transportation, Special Travel Request

Date of Request: _____

Curricular Field Trip ☐ Extra - Curricular Field Trip ☐ Out of State Trip ☐

Students will miss other classes: ☐ Yes ☐ No *(Attach List of Names)*

Destination: _____ City: _____

Name of overnight Accommodations: _____ City: _____

Date of Departure: _____ Time: _____ ☐ A.M. ☐ P.M.

Date of Return: _____ Time: _____ ☐ A.M. ☐ P.M.

Place of Departure: _____ Parking Lot: _____

Type of Transportation Requested

☐ Bus (25) ☐ Bus (56) ☐ Bus (56) ☐ Passenger Van (12)

Rentals or Charter: _____ Number of Vehicles: _____

Number of Students: _____ *(Attach List of Names)* Number of Faculty/Staff/Approved Volunteers: _____ *(Attach List of Names)*

Instructor in Charge: _____ Telephone Number/Extension: _____

Budget(s) to be Charged

Account Number is required for processing

*Account Number: _____ ***Required Field** *Object Code: _____ ***Required Field**

Comment/Special Instructions: _____

Required Signatures

All signatures are required for processing

In accordance with ***Board Procedure 6401***, I certify that **ALL** student participants are enrolled in course _____ and/or are members of _____ campus organization.

Faculty/Club Advisor Signature: _____ Date: _____

Division Dean/Director of Student Activities: _____ Date: _____

Assistant Superintedent/Vice President of Student Services or Assistant Superintendent/Vice President of Instruction & Planning:

_____ Date: _____

Please complete and submit form to your Division Dean or Advisor, then to the Assistant Superintendent/Vice President of your area, for approval. If your trip is approved, please forward the signed form to the Maintenance & Operations office via e-mail to veronica.arroyo@deltacollege.edu.

Requests must be submitted two (2) weeks prior to the desired date of travel.

If you have any questions or concerns, please call the Maintenance Office at ext. 5063.