

## FIELD TRIP NOTIFICATION FORM

**Please notify SED at a minimum 48 hours before the trip is to take place.**

**Please complete all sections:**

Sponsor Name: \_\_\_\_\_

Sponsor LEA Code: \_\_\_\_\_

Site Name: \_\_\_\_\_

Site LEA Code: \_\_\_\_\_

Date of Trip: \_\_\_\_\_

Field Trip Destination: \_\_\_\_\_

Destination Address: \_\_\_\_\_

Time of Departure from site: \_\_\_\_\_

Time of Return to site: \_\_\_\_\_

Number of Children Attending Trip: \_\_\_\_\_

Meals Served at Trip Site: \_\_\_\_\_

Please check which meal will be served:

\_\_\_\_ Breakfast

\_\_\_\_ Lunch

\_\_\_\_ Dinner

\_\_\_\_ Snack

Meals Service Times(s): \_\_\_\_\_

How are meals being transported to trip site? \_\_\_\_\_

Will all children be attending this trip? Yes or No

If no, will you be serving children at the normal site? Yes or No

By checking this box  I hereby assure that:

1. Only meals served to eligible children will be claimed for reimbursement
2. All meals will meet meal pattern requirements
3. All meals will be properly supervised
4. Safe food handling procedures will be implemented during transportation and service of meals

Authorized Representative Name (Print/Type): \_\_\_\_\_

Authorized Representative Title (Print/Type): \_\_\_\_\_

Please Fax to 518-474-9920