21st Century Community Learning Centers

Field Trip Submission Log

Name of Subgrantee (LEA/CBO) _____ **Site** _____

Superintendent/Designee _____ **Executive Director (CBO)** _____
Signature **Title** **Signature**

Principal _____
Signature

Please list all field trips that are anticipated during the summer.

Destination and Address of Each Field Trip	Date(s)	Departure Time Return Time	Approximate # of Students	Approximate # of Adults	Approximate Round-trip Mileage	Approximate Cost to be Charged to 21st CCLC Grant
		Depart Time: _____ Return Time: _____				
		Depart Time: _____ Return Time: _____				
		Depart Time: _____ Return Time: _____				
		Depart Time: _____ Return Time: _____				

* For each Field Trip taken, the *Field Trip Lesson Plan* form must be completed and filed accordingly with reporting documentation. Please be as detailed as possible when completing the information. As with all other reports, these documents must be readily accessible to your assigned TA and the ALSDE.