## **SCHOOL TRIP PERMIT**

This is to certify that permission has been granted for the vehicle designated below to make the trip on the date listed. This trip is following the rules and regulations of the Ohio Department of Education and Workforce and the Department of Public Safety.

Vehicle Number	_Date of Trip
Starting Mileage	_Ending Mileage
Vehicle Driver	_
Group Being Transported	
Number of Students on Trip	_
Advisor/Teacher/Chaperone(s)	
Departure Time	
Return to district time	
Destination	
Meal Stop Planned En Routeyes	no
District Emergency Contact	
Phone Number	
☐ I have conducted the pre-trip safety briefing	g as required.
☐ Emergency evacuation and vehicle safety in	•
Vehicle Driver (signature)	
Date	
Trip Approved by (signature)	
Date	

Please be sure to have printed or written directions to the destination as listed above.

An approved trip permit and trip directions must be carried on the trip by the driver.

