



Field Trip Funding Request

The Schroon Lake PTSO provides funding to help support educational field trips for students. Please submit this form for each field trip for which PTSO funding is requested.

Trip Information

Teacher/Staff Member Requesting Funds: _____

Email: _____ Date of Trip: _____

Grade(s) / Class / Student Group: _____

Field Trip / Destination: _____

Brief Description / Educational Purpose of Trip: _____

PTSO Funding Request

Standard PTST Contribution: \$10 per participating student $\times$ _____ number students = \$_____

Additional Funding Requested (if any): \$_____

If requesting funding beyond the standard \$10 per student contribution, please briefly describe the additional need and how the funds will be used: _____

Total PTST Funding Requested: \$_____ Total Est. Cost of Trip (if known): \$_____

Payment Information

How should the PTST contribution be paid?

☐ Payment directly to vendor/destination

☐ Reimbursement

☐ Payment to Schroon Lake Central School

☐ Other: _____

Payee / Vendor: _____ Payment Due By: _____

Invoice, registration, quote, or other documentation attached? ☐ Yes ☐ No ☐ Not applicable

Certification

I certify that the number of participating students stated above is accurate to the best of my knowledge and understand that PTST funding will be based on the actual number of participating eligible students.

Applicant Signature: _____ Date: _____

PTST USE ONLY

Date Received: _____

Amount Approved: \$_____

Amount Requested: \$_____

Date of Decision: _____

Decision:

Payment Method:

☐ Approved in full ☐ Approved in part

☐ Vendor payment

☐ More information requested

☐ Reimbursement

☐ Not approved

☐ Other: _____

Approved By: _____