

Polk County Conservation Environmental Education Program/Field Trip Request Form

School: _____

District: _____

Teacher contact: _____

Phone number: _____

Address: _____

Grade: _____

Number of sections: _____

Approximate number of students/section: _____

Program topic or field trip theme: _____

Iowa Core Science Standard to meet: _____

Have you done this field trip/program in the past: _____

Classroom

	Date	Times
1 st Choice		
2 nd Choice		
3 rd Choice		

Field Trip

Location: _____

Arrival Time: _____

Departure Time: _____

	Date
1 st Choice	
2 nd Choice	
3 rd Choice	

Special Needs: _____

Comments: _____

