

## Field Trip Fee Request Form

Student Name:	Student ID:
School Name:	Fee Amount Requested:
Description of Senior Fee:	
	ng Senior Fee:
Families In Tr	ransition Verification (Official Use Only)
	rent 2024-2025 Student Residency Questionnaire has been e on this student by the parent/guardian.
<ul> <li>I have confirmed that the F</li> <li>Department of Education</li> </ul>	Field Tripe description meets the criteria of the Florida FIT grant.
☐ Submit Field Trip fee Purc	hase Order for specified school
FIT Official Name:	Date: