Erie County Technical School

Field Trip Request Form

Instructor: Alaina Litz Date of Request: 10/15/25

Program: STS Sub Required: (YES) / NO

Day and Date(s) of Trip: TBD

Time(s): **AM Session:** 800 to 1030

PM Session: _____ to _____

Time for **All Day:** _____ to _____

Number of students participating: AM: 30 PM: _____

Destination & Address: Mercyhurst university

Mode of transportation: bus

Transportation required for the duration of the trip? (YES) / NO

List of chaperones: Mariah Loutzenhiser

Educational Rationale: explore options for college

Cost to students: Ø (Attach an itemized description if necessary)

Cost to ECTS: Ø ☐ Budget ☐ Enterprise

Where applicable please attach itinerary.

Principal 's Signature: David Swanson Date: 10/15/25

Instructor's Signature: Alaina M Litz Date: 10/15/25

Board Approval Date: _____

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All Erie County Technical School Field Trips Must Adhere to Operating Committee Policy #231