



Harleton
Independent School District

Jay Ratcliff
Superintendent

**HARLETON ISD
FIELD TRIP REQUEST FORM**

Employee Requesting: Karlee Cochran

Class or Organization Attending: State Powerlifting

Location of Trip: Edinburg, TX

Purpose of the Trip: State Powerlifting Meet

Date Leaving: 3/17/26

Time Leaving: 5 AM

Date Returning: 3/19/26

Time Returning: 4 PM

Approximate Number of Students Attending: 6

Number of Chaperones/Teachers: 2

Number of Buses: 1 Van

Chaperone/Teacher Names: Karlee Cochran,

Bus Drivers: _____

Daniel Martin

Estimated Cost per Student \$ _____

Student or School Funded _____

If School Funded, Account Code: _____

Purchase Order Entered: _____

Transportation Request Emailed: _____

Purchase Order Amount: _____

Deposit Required: \$ _____ Credit Card or Check: _____

Paid: _____ Bal. Due: _____

Additional Information: _____

Principal's Signature: 

Date: 2/25/26

Superintendent's Signature: 

Date: 2/25/26

OVERNIGHT OR OUT OF STATE TRIPS MUST HAVE BOARD APPROVAL

Board Approval: Yes _____ No _____ Date: _____