Application

Info: Fields with an asterisk (*) are required.
✓ Question Group
Acknowledgement of auto-save*
Please check the box to acknowledge that you understand that this application auto-saves.
Date of Application*
Name of School*
County of School*
The County, District and School each have a DOE Code. Please use the following link to find the DOE Codes correspondent to your County, District and School: https://education.state.nj.us/directory/pub.php Please enter the name of the school in " Find a Public School by Keyword " search field at the bottom of the page to retrieve all three DOE Codes.
Example: ATLANTIC COUNTY (01) - <u>County DOE Code</u> is 01 Absecon Public Schools District (0010)- <u>District DOE Code</u> is 0010 Emma C Attales (050)- <u>School DOE Code</u> is 050
County DOE Code*
District DOE Code*
School DOE Code*
Main Phone Number for School*
Street Address of School*
City of School*
Zip Code of School*
Principal's Name*
Principal's E-mail Address*
Percentage of Students Receiving Free and Reduced Lunch*
New Jersey Legislative District where school is located*

https://www.grantinterface.com/Application/BaseForm.aspx?eqs=fiaADTHDZebl4LsMCE8YeJo... 1/11/2016

Application

What district is the school located in? There are 40 legislative districts in New Jersey. Information can be found at: http://http://www.njleg.state.nj.us/districts/districtnumbers.asp
Name(s) of Field Trip Coordinating/Contact Teacher or Teachers *
Teacher(s) Contact Information* Please provide cell and school telephone numbers, and home number (optional) for each Teacher. Please provide school e-mail and personal e-mail (optional) for each Teacher.
Subject matter of Field Trip* Check all subject areas that apply. College Campuses (must be in NJ, CT, DE, PA, MD, Washington, DC) Dance Historic Sites and Museums Multi Arts/Arts Festivals Multi Arts/Arts Festivals Nature Preserves and Parks Science Museums Theatre Visual Arts Other (If Other please explain below)
Please explain if you selected "Other" (150 words or less)
Name and Address of Field Trip destination* Purpose of the Field Trip* Please describe the purpose of the Field Trip (i.e. Hamlet Performance, Tesla Energy Exhibit at Liberty Science Center, Perspective College Student Open House, etc.)
Date and Time of Event*
Grade(s) of students attending the event*
Total Number of Students Participating*
Total Number of Adults Participating*
Number of Buses needed and anticipated cost per bus:*
Budget for the trip* Please attach a budget or type the information into the text box. Please provide the complete budget for the field trip, including admission fees, substitute teachers, etc. and explain how you plan to cover the expenses not paid for by the Field Trip New Jersey Fund.
[1000 characters left of 1000]

Application

Upload a file [5 MiB allowed]
Name of Bus Company*
Name of Bus Provider and Payment Information*
If grant is awarded, please indicate to whom the check will be payable to. Please provide the contact name and mailing address for the organization that will receive the check - either the Bus Company, the School District Office or the School Office. Please choose just one organization that would receive the check.
Value of the Field Trip*
Why do you think this Field Trip will be of value to you and your students? What are your academic goals for this excursion for your students and/or their personal growth? (250 words or less)
Classroom Experience* How will you incorporate this excursion in your classroom activities and/or curriculum before the field trip and how
will you reinforce this experience <u>after</u> the field trip? (250 words or less)
Curriculum standards* What curriculum standards will be addressed by the field trip experience? (200 words or less).
Approval of the School Principal*
Please attach the Verification Form with the School Principal's signature.
Certificate of Insurance*
Please upload Certificate of Insurance. Upload a file [5 MiB allowed]
Save Application Submit Application