Bus-9 Pumpkin-5 Snack-15,00

School-Related Student Trip Request Form

SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO THE TRIP.

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SCHOOL 50 ES FACULTY MEMBER(S) SPONSORING TRIP Purple Pod (Ingre	
TYPE OF TRIP (CHECK ONE):	
Classroom Field Trip Class Trip (i.e., junior, senior), specify	
☐ Organization/Club Trip, specify	Other (athletic, band, if applicable)
	623 Talmage 069-613-6
DESTINATION Desine'S Pumpkin ADDRESS Out of State Out of County Within County	nay Road PHONE DO 1
☐ Overnight: give name, address, phone of lodging	0.1/
DATE(S) OF TRIP DEPARTURE	TIME 9:15 RETURN TIME 3:15
PURPOSE/EDUCATIONAL VALUE Science	- Plants & Animals
SOURCE OF FUNDING FOR TRIP Parents	
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY,	
BILL TRIP EXPENSES TO:	_
☐ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL	
NUMBER OF STUDENTS 76 FACULTY SPONSORS	OTHER CHAPERONES
TOTAL # OF PARTICIPANTS 105	
MODE OF TRANSPORTATION	
IS DISTRICT TRANSPORTATION NEEDED? ZNO YES, SEE PROCEDURE 09.36 AP.212.	
☐ CERTIFICATED COMMON CARRIER; SPECIFY	
☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)	
SUPERVISION (Attach list of names of adults accompanying students on trip.)	
Have all chaperones undergone the required record	s AOC check and been designated by the
	□ NO Q-1G-13
Beeling Jum	017-13
Signature of Faculty Sponsor	Date
Trip has been approved disapproved. Reason for disapproval	
May to	P-74-13
Signature of Superintendent/Designee	Date
For overnight and/or out-of-state trips, approval of the superintendent and/or Board may be required by policy 09.36.	
FIELD TRIP CHARGES	
\$.93 per mile	Meals provided by sponsor: ☐ Yes ☐ No
Regular hourly rate for driver, plus overtime if driver's hours	_
exceed 40 per week	
Admission to event provided by sponsor:	Send copy to lunchroom: ☐ Yes ☐ No
	Bus limits: 2 persons per seat
Overnight lodging: Single room Driver time state 15 min, before departure and and 15 min.	
Driver time starts 15 min. before departure and ends 15 min. after arrival	
Driver requested: 1 2	Number of buses requested: