

## School-Related Student Trip Request Form

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

SCHOOL SCES FACULTY MEMBER(S) SPONSORING TRIP Ashley Phillips

TYPE OF TRIP (CHECK ONE):

- ☐ Classroom Field Trip ☒ Class Trip (i.e., junior, senior), specify 5th Grade  
☐ Organization/Club Trip, specify \_\_\_\_\_ ☐ Other (athletic, band, if applicable)

DESTINATION SC Cooperative Ext Off. ADDRESS 100 Oak Tree Way PHONE 477-2217  
☐ Out of State ☐ Out of County ☒ Within County

☐ Overnight: give name, address, phone of lodging \_\_\_\_\_

DATE(S) OF TRIP 8/28/14 DEPARTURE TIME 9:00 RETURN TIME 2:00

PURPOSE/EDUCATIONAL VALUE It Starts With Me - Anti-Bully Initiative

SOURCE OF FUNDING FOR TRIP \_\_\_\_\_

NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.

BILL TRIP EXPENSES TO:

☐ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☐ BOARD ☒ OTHER, SPECIFY SCES

NUMBER OF STUDENTS 150 FACULTY SPONSORS 5 OTHER CHAPERONES \_\_\_\_\_

TOTAL # OF PARTICIPANTS 155

MODE OF TRANSPORTATION

IS DISTRICT TRANSPORTATION NEEDED? ☐ NO ☒ 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 records AOC check and been designated by the principal/designee to supervise students? ☒ YES ☐ NO

Ashley Phillips  
Signature of Faculty Sponsor

8/8/14  
Date

Trip has been ☒ approved ☐ disapproved. Reason for disapproval \_\_\_\_\_

Mark  
Signature of Superintendent/Designee

8-8-14  
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

Regular hourly rate for driver, plus overtime if driver's hours exceed 40 per week

Meals provided by sponsor: ☐ Yes ☐ No

Admission to event provided by sponsor: ☐ Yes ☐ No

Send copy to lunchroom: ☐ Yes ☐ No

Bus limits: 2 persons per seat

Overnight lodging: Single room

Driver time starts 15 min. before departure and ends 15 min. after arrival

Driver requested: 1. Wendy Goodlett 2. \_\_\_\_\_ Number of buses requested: \_\_\_\_\_

\*Only need driver to shuttle between 8:50-9:10 and 2:00-2:10

White Copy - Central Office

Yellow Copy - Bus Driver

Pink Copy - School Sponsor

594-1581