

School-Related Student Trip Request Form

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

SCHOOL SCES FACULTY MEMBER(S) SPONSORING TRIP Penrod, Noel

TYPE OF TRIP (CHECK ONE):

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

DESTINATION Love My Neighbor / Nursing Home ADDRESS 851 Taylorsville Rd PHONE 599-6044 Goodlett

- ☐ Out of State ☐ Out of County ☒ Within County

☐ Overnight: give name, address, phone of lodging _____

DATE(S) OF TRIP 5-22-14 DEPARTURE TIME 10:00 RETURN TIME 2:30

PURPOSE/EDUCATIONAL VALUE Community Service

SOURCE OF FUNDING FOR TRIP Mr. Thomas

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

BILL TRIP EXPENSES TO:

- ☐ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☐ BOARD ☐ OTHER, SPECIFY _____

NUMBER OF STUDENTS 145 FACULTY SPONSORS 5 OTHER CHAPERONES _____

TOTAL # OF PARTICIPANTS 150

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

Michelle R. Penrod
Signature of Faculty Sponsor

5-2-14
Date

Trip has been ☒ approved ☐ disapproved. Reason for disapproval _____

Ma Z

Signature of Superintendent/Designee

5-5-14

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. _____ 2. _____ Number of buses requested: _____

Instructional Plan for Field Study/Special Event Learning Experience

Teacher: Penrod - 5th grade - Noel

Class: 5th grade

Date: 5-22-14

Content Connection: On Demand Instructional Plan

Targeted Standard: _____

PRE Activities

- Guest speakers discussing importance of
community service
- On Demand writing practice - putting
writing into action

POST Activities

- Reflection on the service

Reading/Writing/Math/Science/Social Studies/Arts and Humanities Strategies
(Use any that apply)

Choose one post-assessment of learning activity:

- ☐ Open Response Prompt: _____
- ☐ Student Product: _____
- ☐ Performance Event: _____
- ☒ Writing for Authentic Audience: Reflection on experience

Adaptations or Special Strategies (if applicable)

QF
to 12.

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 3rd Grade
☐ Organization/Club Trip, specify _____ ☐ Other (athletic, band, if applicable)

DESTINATION Mr. Gatti's ADDRESS 1108 Lyndon Lane PHONE 339-8338
☐ Out of State ☒ Out of County ☐ Within County Louisville, KY

☐ Overnight: give name, address, phone of lodging _____

DATE(S) OF TRIP 5/20/14 DEPARTURE TIME 9:00 RETURN TIME 2:00

PURPOSE/EDUCATIONAL VALUE To explore career options in the hospitality cluster.

SOURCE OF FUNDING FOR TRIP Students

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 140 FACULTY SPONSORS 7 OTHER CHAPERONES 0
TOTAL # OF PARTICIPANTS 147

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

5/6/14
Date

Trip has been ☒ approved ☐ disapproved. Reason for disapproval _____

Mark T...

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

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. _____ 2. _____ Number of buses requested: _____

Instructional Plan for Field Study/Special Event Learning Experience

Teacher: Blackburn, Coots, Hile, Pollett, Simpson, Thomas

Class: 3rd Grade

Date: _____

Content Connection: ^{Instructional Plan} Practical Living

Targeted Standard:

2.36- Students use strategies for choosing and preparing for a career.

PRE Activities

* research career options in the hospitality field

POST Activities

* create a flyer for a job posting listing the skills needed for that job.

Reading/Writing/Math/Science/Social Studies/Arts and Humanities Strategies
(Use any that apply)

Choose one post-assessment of learning activity:

☐ Open Response Prompt: _____

☐ Student Product: _____

☐ Performance Event: _____

☒ Writing for Authentic Audience: thank you letter to Mr. Gatti explaining what they learned about career

Adaptations or Special Strategies (if applicable)

opportunities in a restaurant.