

School-Related Student Trip Request Form

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

SCHOOL SCES FACULTY MEMBER(S) SPONSORING TRIP Olivia Pitchford

TYPE OF TRIP (CHECK ONE):

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

DESTINATION Mall St. Matthews ADDRESS 5000 Shelbyville Rd PHONE 502 893 0311

☐ Out of State ☐ Out of County ☐ Within County

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

DATE(S) OF TRIP 12/17/15 DEPARTURE TIME 9:30 RETURN TIME 2:00

PURPOSE/EDUCATIONAL VALUE practicing functional living skills

(making purchases, sit down restaurant dining, talking to workers)

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 _____

NUMBER OF STUDENTS 7 FACULTY SPONSORS 4 OTHER CHAPERONES _____

TOTAL # OF PARTICIPANTS _____

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

[Signature]
Signature of Faculty Sponsor

Date

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

[Signature]

Signature of Superintendent/Designee

12-2-15

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: 1 special needs bus (1 wheel chair)

Instructional Plan for Field Study/Special Event Learning Experience

Teacher: Olivia Pitchford

Class: FMD

Date: _____

Content Connection: Math / Social ^{Instructional Plan}

Targeted Standard: _____

PRE Activities

- Next Dollar Math lesson and activities
- Social story about eating in a sit down restaurant and talking to people who work in the mall

POST Activities

- Class discussion
- next dollar activity with items bought from mall

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

Math: Rounding to next dollar value up

Choose one post-assessment of learning activity:

- ☐ Open Response Prompt: _____
- ☒ Student Product: Class discussion and writing activity
- ☐ Performance Event: _____
- ☐ Writing for Authentic Audience: _____

Adaptations or Special Strategies (if applicable)

We will complete scavenger hunt at mall finding functional vocabulary as well as make purchasing using next-dollar strategy. All materials will be adapted to help my students based on rep's.