

\$5.00
RF

School-Related Student Trip Request Form

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

SCHOOL SCEC FACULTY MEMBER(S) SPONSORING TRIP Hutchins/Tappan

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 Sluggers Field ADDRESS _____ PHONE _____

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

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

DATE(S) OF TRIP Wed, March 23 DEPARTURE TIME 9:15 RETURN TIME 2:00

PURPOSE/EDUCATIONAL VALUE Kosair Safety Town, Wellness

World Hospital Land

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 ☐ BOARD ☐ OTHER, SPECIFY _____

NUMBER OF STUDENTS 45 FACULTY SPONSORS 5 OTHER CHAPERONES _____

TOTAL # OF PARTICIPANTS 50

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

Nichole Myntel
Signature of Faculty Sponsor

2/11/16
Date

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

NM
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: Hutchins / Tappan

Class: Kindergarten

Date: March 23, 2016 - Wednesday

Content Connection: Healthy Living/Wellness

Targeted Standard: _____

PRE Activities

books, writing (journal), whole group discussion

POST Activities

journal writing/reflection
practice learned skills (brush teeth,
911, fire, sleep, exercise), whole group discussion

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

journal modeling, application/discussion

Choose one post-assessment of learning activity:

- ☐ Open Response Prompt: _____
- ☒ Student Product: journal
- ☐ Performance Event: _____
- ☒ Writing for Authentic Audience: thank yous to Kasir

Adaptations or Special Strategies (if applicable)