School-Related Student Trip Request Form SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO THE TRIP. Elon - Faculty member(s) sponsoring trip TYPE OF TRIP (CHECK ONE): ☐ Organization/Club Trip, specify Other (athletic, band, if applicable) DESTINATION ADDRESS ☐ Out of State ② Qut of County ☐ Within County \square Overnight: give name, address, phone of lodging DATE(S) OF TRIP 5/4/16 DEPARTURE TIME PURPOSE/EDUCATIONAL VALUE Number SOURCE OF FUNDING FOR TRIP NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY. BILL TRIP EXPENSES TO: \square SPONSORING ORGANIZATION \square SCHOOL COUNCIL □ BOARD □ OTHER, SPECIFY NUMBER OF STUDENTS" FACULTY SPONSORS OTHER CHAPERONES TOTAL # OF PARTICIPANTS MODE OF TRANSPORTATION IS DISTRICT TRANSPORTATION NEEDED? INO ☑ 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 of Faculty Sponsor Trip has been approved disapproved. Reason for disapproval 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 Regular hourly rate for driver, plus overtime if driver's hours exceed 40 per week Send copy to lunchroom: Admission to event provided by sponsor: ☐ Yes ☐ 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. Number of buses requested:

White Copy - Central Office

Yellow Copy - Bus Driver

Pink Copy - School Sponsor