STUDENTS 09.36 AP.21

School-Related Student Trip Request Form

SUBMIT THIS FORM ONE WEEK PRIOR TO THE BOARD MEETING.		
FACULTY MEMBER(S) SPONSORING TRIPP-3 HOMEROOMS		
TYPE OF TRIP (CHECK ONE):		
□x Classroom Field Trip □ Class Trip	(i.e., junior, senior),	specify
☐ Organization/Club Trip, specify		
DESTINATION _SOUTHGATE FIRE DEPT	_ADDRESS	PHONE
☐ Out of State ☐ Out of County ☐ Within County ☐ Overnight; give name, address, phone of lodging		
DATE(S) OF TRIPTENTATIVE OCT. 19_AND/OR1:45 RETURN TIME2:45	OCT. 28 DEPART	URE TIME
PURPOSE/EDUCATIONAL VALUESTUDENTS WILL LEARN ABOUT COMMUNITY		
Source of funding for tripNo Cost		
NUMBER OF: STUDENTS82 FACULTY SPONSORS TOTAL # OF PARTICIPANTS		S
MODE OF TRANSPORTATION		
☐ CERTIFICATED COMMON CARRIER; SPECIFY	WALK	
☐ PRIVATE VEHICLE, AS ALLOWED BY POLICY; SPI	ECIFY DRIVER(S)	
SUPERVISION (ATTACH LIST OF NAMES OF ADULTS ACCOU	MPANYING STUDENTS ON TRIP.)	
Have all chaperones undergone the required recorprincipal/designee to supervise students? $x \square$		ed by the
Eddie Franke	Oct. 7, 2016_	
Signature of Faculty Sponsor	Date	
Trip has been □ approved □ disapproved. Reason for disapproval		
Signature of Board Chairperson		
For overnight and/or out-of-state trips, approval of the Board may b	pe required by policy 09.36.	

RELATED PROCEDURES:

09.36 AP.211, 09.36 AP.23