School-Related Student Trip Request Form

SUBMIT THIS FORM ONE WEEK PRIOR TO THE BOARD MEETING.
FACULTY MEMBER(S) SPONSORING TRIP Deanna Landrum
TYPE OF TRIP (CHECK ONE):
□ Classroom Field Trip □ Class Trip (i.e., junior, senior), specify □ Other (athletic, band, if applicable) □ DESTINATION Freedom Center ADDRESS 50 € Freedom Way PHONE (877) 648-4838 □ Out of State □ Out of County □ Within County □ Overnight; give name, address, phone of lodging □ OTHER AUGUST 26th Turn DEPARTURE TIME 1030 RETURN TIME 230
DATE(S) OF TRIP August 2014 12 DEPARTURE TIME 1030 RETURN TIME 230
Purpose/Educational Value Culminating Activity of Civil War/Slavery
Source of funding for trip The Greater Cincinnati Foundation Grant No student shall be denied the trip because of an inability to pay. BILL TRIP EXPENSES TO: Sponsoring organization School council BOARD OTHER, SPECIFY Grant Funds Number of: Students 15 Faculty sponsors 2 OTHER CHAPERONES
TOTAL # OF PARTICIPANTS 17
Mode of Transportation CERTIFICATED COMMON CARRIER; SPECIFY Newport or Bellevue Bus PRIVATE VEHICLE, AS ALLOWED BY POLICY; SPECIFY DRIVER(S)
SUPERVISION (ATTACH LIST OF NAMES OF ADULTS ACCOMPANYING STUDENTS ON TRIP.) Deanna Land
Have all chaperones undergone the required records check and been designated by the principal/designee to supervise students? Yes No Signature of Faculty Sponsor Date
Signature of Facility Sponsor
Trip has been □ approved □ disapproved. Reason for disapproval
Signature of Board Chairperson Date
For overnight and/or out-of-state trips, approval of the Board may be required by policy 09.36.

RELATED PROCEDURES:

09.36 AP.211, 09.36 AP.23

Review/Revised:7/11/13