

School-Related Student Trip Request Form

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

SCHOOL Taylorsville Elem FACULTY MEMBER(S) SPONSORING TRIP Heiss

TYPE OF TRIP (CHECK ONE):

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

DESTINATION SCES ADDRESS 1265 Mt. Washington PHONE 477-6950
☐ Out of State ☐ Out of County ☒ Within County

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

DATE(S) OF TRIP Oct. 24, 2017 DEPARTURE TIME See att RETURN TIME See att

PURPOSE/EDUCATIONAL VALUE

AG Day district initiative | Group 1 Group 2
9-11 10:30 to 12:30
SOURCE OF FUNDING FOR TRIP But see attached schedule please

NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.

BILL TRIP EXPENSES TO:

☐ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☐ BOARD ☒ OTHER, SPECIFY Central Office

NUMBER OF STUDENTS 601 FACULTY SPONSORS 23 OTHER CHAPERONES 5 to 7

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.) Homerose Teachers

Have all chaperones undergone the required records AOC check and been designated by the principal/designee to supervise students? ☒ YES ☐ NO

Haidi Huser
Signature of Faculty Sponsor

9.12.17
Date

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

[Signature]
Signature of Superintendent/Designee

9.14.17
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: 5 for group 1+2

White Copy - Central Office

Yellow Copy - Bus Driver

Pink Copy - School Sponsor