

STUDENTS

09.36 AP.21

School-Related Student Trip Request Form

SUBMIT THIS FORM ONE WEEK PRIOR TO THE NEXT REGULAR BOARD MEETING.

SCHOOL Pickensville High School FACULTY MEMBER(S) SPONSORING TRIP Susan Huffman

TYPE OF TRIP (CHECK ONE):

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

DESTINATION Kings Island ADDRESS Cincinnati, OH PHONE 513-754-5733

☒ Out of State ☐ Out of County ☐ Within County

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

Sun DATE(S) OF TRIP April 22, 2018 DEPARTURE TIME 6:30 Am RETURN TIME midnight

PURPOSE/EDUCATIONAL VALUE Senior Class Trip

SOURCE OF FUNDING FOR TRIP _____

NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY. \$34 per student

BILL TRIP EXPENSES TO: ☐ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☐ BOARD ☐ OTHER, SPECIFY _____

NUMBER OF: STUDENTS 60 FACULTY SPONSORS 1 OTHER CHAPERONES

TOTAL # OF PARTICIPANTS 62

Susan Huffman
Ashley Adams

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 check and been designated by the principal/designee to supervise students? ☐ Yes ☐ No

Susan Huffman
Signature of Faculty Sponsor

1/8/18
Date

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

[Signature] 1-8-18
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.

RELATED PROCEDURES:

09.36 AP.211, 09.36 AP.212, 09.36 AP.22, 09.36 AP.23

Review/Revised: 8/20/01