

**School-Related Student Trip Request Form**

SUBMIT THIS FORM ONE WEEK PRIOR TO THE BOARD MEETING.
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FACULTY MEMBER(S) SPONSORING TRIP Mary Melville

## TYPE OF TRIP (CHECK ONE):

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

DESTINATION NKU-Dreamfest ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

- ☐ Out of State ☐ Out of County ☒ Within County

☐ Overnight; give name, address, phone of lodging \_\_\_\_\_

DATE(S) OF TRIP Thurs., 3/8/18 DEPARTURE TIME 8:30 am. RETURN TIME 2:00 pmPURPOSE/EDUCATIONAL VALUE A day for students to participate in hands-on activities in math, science, visual & performing arts & other areas.

SOURCE OF FUNDING FOR TRIP \_\_\_\_\_

**NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.**BILL TRIP EXPENSES TO: ☐ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☐ BOARD ☐ OTHER, SPECIFY \_\_\_\_\_NUMBER OF: STUDENTS 15 FACULTY SPONSORS 1 OTHER CHAPERONES 1TOTAL # OF PARTICIPANTS 17

## MODE OF TRANSPORTATION

☒ CERTIFICATED COMMON CARRIER; SPECIFY Dayton school bus☐ PRIVATE VEHICLE, AS 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

Mary M. Melville  
 Signature of Faculty Sponsor

1/26/18  
 Date

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