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12-

## School-Related Student Trip Request Form

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

SCHOOL SCES FACULTY MEMBER(S) SPONSORING TRIP A. Phillips

TYPE OF TRIP (CHECK ONE):

- ☐ Classroom Field Trip ☒ Class Trip (i.e., junior, senior), specify 3rd Grade  
☐ Organization/Club Trip, specify \_\_\_\_\_ ☐ Other (athletic, band, if applicable)

DESTINATION KY Derby Museum ADDRESS 704 Central Ave PHONE 502-637-1111  
Broad Run Park ADDRESS 11551 Bardstown Rd PHONE 502-584-0350

☐ Out of State ☒ Out of County ☐ Within County

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

DATE(S) OF TRIP 11/8/18 DEPARTURE TIME 9:00 RETURN TIME \_\_\_\_\_

PURPOSE/EDUCATIONAL VALUE to learn about career

opportunities

SOURCE OF FUNDING FOR TRIP students

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 122 FACULTY SPONSORS 6 OTHER CHAPERONES 6

TOTAL # OF PARTICIPANTS 134

MODE OF TRANSPORTATION

IS DISTRICT TRANSPORTATION NEEDED? ☒ NO ☐ YES, SEE PROCEDURE 09.36 AP.212.

☐ CERTIFICATED COMMON CARRIER; SPECIFY Jefferson Transportation

☐ 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 AOC check and been designated by the principal/designee to supervise students? ☒ YES ☐ NO

A. Phillips  
Signature of Faculty Sponsor

10/11/18  
Date

Trip has been ☒ approved ☐ disapproved. Reason for disapproval \_\_\_\_\_

Jane Anderson  
Signature of Superintendent/Designee

10-11-18  
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: \_\_\_\_\_

# Instructional Plan for Field Study/Special Event Learning Experience

Teacher: C Abell, Blackburn, Mantle, & Thomas, & Dill

Class: 3rd

Date: 11/8/18

Class Size: 100 122

## Instruction Plan

### PRE Activities

- \* discussion of careers
- \* read books on careers

### POST Activities

- \* discussion of possible careers in the equine field

Reading/Writing/Math/Science/Social Studies/Arts and Humanities Strategies  
(Use any that apply)

Choose one post-assessment of learning activity:

- ☐ Open Response Prompt: \_\_\_\_\_
- \* ☒ Student Product: poster: What I Want to Be...
- ☐ Performance Event: \_\_\_\_\_
- ☐ Writing for Authentic Audience: \_\_\_\_\_

Adaptations or Special Strategies (if applicable)