

**School-Related Student Trip Request Form**

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

SCHOOL Scms

FACULTY MEMBER(S) SPONSORING TRIP Karen left

TYPE OF TRIP (CHECK ONE):

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

DESTINATION Art on Theater & Spaghetti Factory

ADDRESS 316 W main PHONE \_\_\_\_\_

☐ Out of State ☒ Out of County ☐ Within County

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

DATE(S) OF TRIP 11/23/18

DEPARTURE TIME 4:00pm

RETURN TIME 11:30pm

PURPOSE/EDUCATIONAL VALUE taking students to see a play.

SOURCE OF FUNDING FOR TRIP donation / 21st CCLC

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 65 FACULTY SPONSORS \_\_\_\_\_ OTHER CHAPERONES 10

TOTAL # OF PARTICIPANTS 75

MODE OF TRANSPORTATION Miller Transportation

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

☒ CERTIFICATED COMMON CARRIER; SPECIFY Miller 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

Signature of Faculty Sponsor [Signature]

Date 10/30/18

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

Signature of Superintendent/Designee [Signature]

Date 10/30/18

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: \_\_\_\_\_