

**School-Related Student Trip Request Form**

SUBMIT THIS FORM ONE WEEK PRIOR TO THE BOARD MEETING.

FACULTY MEMBER(S) SPONSORING TRIP K-4**TYPE OF TRIP (CHECK ONE):**

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

DESTINATION Cincinnati Zoo ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

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

☐ Overnight; give name, address, phone of lodging \_\_\_\_\_DATE(S) OF TRIP May 11, 2019 DEPARTURE TIME 8:45a RETURN TIME 2:00pPURPOSE/EDUCATIONAL VALUE See animals in simulated habitats, correlating to life science units on habitats, life cycles, etc.SOURCE OF FUNDING FOR TRIP students life experiences (11)*NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.*BILL TRIP EXPENSES TO: ☐ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☐ BOARD ☐ OTHER, SPECIFY Students will pay cost to zooNUMBER OF: STUDENTS 110 FACULTY SPONSORS 10 OTHER CHAPERONES est. 38  
TOTAL # OF PARTICIPANTS 158**MODE OF TRANSPORTATION**

- ☒ CERTIFICATED COMMON CARRIER; SPECIFY need bus arranged (already spoke to Betty)  
☐ 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 ☐ NoRebecca Kossites  
Signature of Faculty Sponsor2/22/19  
DateTrip 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