

School-Related Student Trip Request Form

SUBMIT THIS FORM ONE WEEK PRIOR TO THE BOARD MEETING.

FACULTY MEMBER(S) SPONSORING TRIP Robin Jones

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 3400 Vine St., Cincinnati PHONE 513-281-4700

- ☒ Out of State ☐ Out of County ☐ Within County
☐ Overnight; give name, address, phone of lodging _____

DATE(S) OF TRIP 5-16-19 DEPARTURE TIME _____ RETURN TIME 1:45PURPOSE/EDUCATIONAL VALUE This year in LA, the sixth grade class read The One and Only Ivan and did research on various animalsSOURCE OF FUNDING FOR TRIP 6th grade account / students \$8/each*NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.*BILL TRIP EXPENSES TO: ☐ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☐ BOARD ☐ OTHER, SPECIFY 6th Grade AccountNUMBER OF: STUDENTS 18 FACULTY SPONSORS 1 OTHER CHAPERONES 2
TOTAL # OF PARTICIPANTS 21

MODE OF TRANSPORTATION

- ☒ CERTIFICATED COMMON CARRIER; SPECIFY Bellevue Bus
☐ PRIVATE VEHICLE, AS ALLOWED BY POLICY; SPECIFY DRIVER(S) _____

SUPERVISION (ATTACH LIST OF NAMES OF ADULTS ACCOMPANYING STUDENTS ON TRIP.) Nancy Smith
Hannah ElliottHave all chaperones undergone the required records check and been designated by the principal/designee to supervise students? ☒ Yes ☐ NoRobin Jones
*Signature of Faculty Sponsor*5/2/19
*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