

School-Related Student Trip Request Form

SUBMIT THIS FORM ONE WEEK PRIOR TO THE BOARD MEETING.

FACULTY MEMBER(S) SPONSORING TRIP: MARY MELVILLE**TYPE OF TRIP (CHECK ONE):**

- ☐ Classroom Field Trip
 ☐ Class Trip (i.e., junior, senior), specify _____
☒ Organization/Club Trip, specify: News Crew
 ☐ Other (athletic, band, if applicable) ____

DESTINATION: HIGHLANDS MIDDLE SCHOOL **ADDRESS:** 2350 MEMORIAL PWY, FT. THOMAS, KY 41075

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

DATE(S) OF TRIP: NOV. 22, 2019 **DEPARTURE TIME:** 11:30AM **RETURN TIME:** 1:30PM**PURPOSE/EDUCATIONAL VALUE:** THE SOUTHGATE NEWS CREW STUDENTS WILL BE VISITING THE HIGHLANDS MIDDLE SCHOOL MEDIA CLASS TO OBSERVE PRACTICES THAT CAN BE REPLICATED AND IMPLEMENTED IN SOUTHGATE.**SOURCE OF FUNDING FOR TRIP:** GENERAL FUND*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 STUDENTS **FACULTY SPONSORS:** 1 **OTHER CHAPERONES:** 1
TOTAL # OF PARTICIPANTS: 17

MODE OF TRANSPORTATION

- ☒ CERTIFICATED COMMON CARRIER; SPECIFY: DAYTON INDEPENDENT SCHOOLS
☐ 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

*Signature of Faculty Sponsor*_____
Date

Trip has been <input type="checkbox"/> approved <input type="checkbox"/> disapproved. Reason for disapproval _____ _____ <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div>_____ <i>Signature of Board Chairperson</i></div> <div>_____ <i>Date</i></div> </div> <p>For overnight and/or out-of-state trips, approval of the Board may be required by policy 09.36.</p>

RELATED PROCEDURES:

09.36 AP.211, 09.36 AP.23

Review/Revised:7/11/13