

SchoolRelated Student Trip Request Form

SUBMIT THIS FORM ONE WEEK PRIOR TO THE BOARD MEETING.

FACULTY MEMBER(S) SPONSORING TRIP MEGHAN DEAN & BRIAN TOLLE

TYPE OF TRIP (CHECK ONE):

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

DESTINATION KINGS ISLANDADDRESS 6300 KINGS ISLAND DRIVE, MASON, OH 45040 PHONE (513) 754-5700☒ Out of State ☐ Out of County ☐ Within County☐ Overnight; give name, address, phone of lodgingDATE(S) OF TRIP MAY DEPARTURE TIME 9:15 AM RETURN TIME 5:30 PM (APPROX)

PURPOSE/EDUCATIONAL VALUE

TO CELEBRATE THE 8TH GRADE STUDENTS AND THEIR TIME AT SOUTHGATE AND CREATE POSITIVE MEMORIES BEFORE THEY GO THEIR SEPARATE WAYS FOR HIGH SCHOOL.

SOURCE OF FUNDING FOR TRIP

FUNDRAISING, STUDENTS, ACTIVITY 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 ACTIVITY FUND

NUMBER OF: STUDENTS 15 FACULTY SPONSORS 3 OTHER CHAPERONES 0
TOTAL # OF PARTICIPANTS 18

MODE OF TRANSPORTATION

☒ CERTIFICATED COMMON CARRIER; SPECIFY DAYTON IND. SCHOOLS-RON KINMAN☐ PRIVATE VEHICLE, AS ALLOWED BY POLICY; SPECIFY DRIVER(S) _____SUPERVISION (ATTACH LIST OF NAMES OF ADULTS ACCOMPANYING STUDENTS ON TRIP.) MEGHAN DEAN, BRIAN TOLLE, COLLIN HERTZENBERG

Have all chaperones undergone the required records check and been designated by the principal/designee to supervise students? ☒ Yes ☐ No

Meghan Dean*Signature of Faculty Sponsor**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:

AP.23

09.36 AP.211, 09.36