

School-Related Student Trip Request Form

SUBMIT THIS FORM ONE WEEK PRIOR TO THE BOARD MEETING.

FACULTY MEMBER(S) SPONSORING TRIP Preschool - Courtney Scott
Shiloh Schweitzer

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. 45220 PHONE _____

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

DATE(S) OF TRIP May 4 2023 DEPARTURE TIME 9:30 RETURN TIME 1:30

PURPOSE/EDUCATIONAL VALUE Environmental awareness, self awareness, hands on learning opportunities, outdoor enrichment

SOURCE OF FUNDING FOR TRIP Preschool Partnership Grant

NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.

BILL TRIP EXPENSES TO: SPONSORING ORGANIZATION SCHOOL COUNCIL BOARD OTHER, SPECIFY Preschool

NUMBER OF: STUDENTS 23 FACULTY SPONSORS 7 OTHER CHAPERONES 10
TOTAL # OF PARTICIPANTS 40

MODE OF TRANSPORTATION

- CERTIFICATED COMMON CARRIER; SPECIFY Executive Transportation
- 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

Shiloh Schweitzer
Signature of Faculty Sponsor

4/10/23
Date

SSA
Signature of Principal

4/11/23
Date

Betty Gunn
Signature of Additional Faculty

4/11/23
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: 3/2/23