

School Field Trip Packet - Overnight Greater than 100 miles without District Transportation

Organization: **Marion County Public Schools** Employee: **PATRICK CAMPBELL**
 Assigned To: **User - kim.hood**
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NOTE: Field trip packets that require Board approval will only be approved at the first regular board meeting each month.

School Professional Leave

03.125 AP.21

* Employee Name Patrick Campbell
 * School/Work site Marion County High School
 * Date(s) of leave 4/1/24-4/6/24
 * Time of departure 06:00 am
 * Destination Panama City FL
 * Purpose/Rationale for attending Spring Break Baseball trip
 * Number of students involved 25

* Substitute needed (please remember to enter No your absence in Aesop, even if a substitute is not required.)

Number of days (Avg. \$100 a day)

Substitute code

* Registration No

Registration cost

Registration code

* Mileage No

Number of miles

Number of days

* Lodging No

Cost per night

Number of nights

Lodging rate

* Meals No

Estimated total meal cost

Meals/Mileage/Parking/Lodging Code

* Grand total of expenses 0

***An overnight stay is required for reimbursement of any meals. Any meal exceeding \$5.00 must be substantiated by an itemized receipt. Maximum allowable food expenditure per day shall be \$40.00 in state and \$46.00 out of state. For lodging to be reimbursed, an original, itemized receipt is required. Registration fees, parking tolls, etc. may be reimbursed with original receipts. Credit card slips, registration forms, or check copies are not accepted as receipts. A Travel Voucher (03.125 AP.22) must be completed after the conference/workshop, etc., to receive reimbursement for actual expenses.**

Notes

Players will be riding with parents/guardians to FI, but will stay as a team in a condo. They will be transported the entire trip by their parents/guardians.

Reviewed/Revised: 01/12/2015

School-Related Student Trip Request Form

09.36 AP.21

* Faculty member(s) sponsoring trip 3
 * Type of trip (i.e. classroom, organization, club, athletic, athletic, band) athletic
 * Destination name Panama City
 * Destination address 22010 Front Beach Road Panama City Beach, FL 32413
 * Destination phone 8772024291

Lodging name

Lodging address

Lodging phone

* Date(s) of trip 4/1/24-4/6/24

* Time of departure 06:00 am

* Purpose/Educational value
Team chemistry, athletic trip

* Source of funding for trip Baseball Boosters

No student shall be denied the trip because of the inability to pay.

* Bill trip expenses to (i.e. Sponsoring organization, school council, Board) Baseball Boosters

* Number of students 25

* Number of faculty sponsors 3

* Other chaperones 0

* Total number of participants 28

Certified common carrier

Private vehicle, if allowed by policy; specify driver(s)

* Supervision (Attach list of names of students and chaperones)

LineupCard2223.docx [view](#)
Added 9/26/2023 9:13:00 AM

Add a File

* Have all chaperones undergone the required records check and been designated by the principal/designee to supervise students? Yes

Reviewed/Revised: 01/12/15

* Employee Signature

Signed: **Patrick Campbell**
Stamped: Tue Sep 26 2023 10:12:49 GMT-0400 (Eastern Daylight Time); 9/26/2023 9:12:49 AM; 2023-09-26 14:12:49; 170.185.150.17; Employee - #334 - PATRICK CAMPBELL

* Principal Signature

Signed: **Robby Peterson**
Stamped: Mon Oct 09 2023 12:55:46 GMT-0400 (Eastern Daylight Time); 10/9/2023 11:55:46 AM; 2023-10-09 16:55:46; 170.185.150.17; Employee - #371 - JOSEPH PETERSON

* Direct this field trip packet to

Supervisor Signature

Not Signed Read-Only

* Field Trip Designee Signature

Not Signed Read-Only

* Date of Board approval

* Superintendent Signature

Not Signed Read-Only

Approve

Deny