

### School-Related Student Trip Request Form

All requests for overnight trips shall be submitted two (2) months prior to the trip. All other trips shall submit requests two (2) weeks prior to the trip.

SCHOOL Bellevue High School FACULTY MEMBER(S) SPONSORING TRIP C. Wheatley, N. Skaggs

TYPE OF TRIP (CHECK ONE):

- Classroom Field Trip
- Class (i.e., junior, senior) Trip, specify Senior class Trip
- Organization/Club Trip, specify \_\_\_\_\_
- Other (athletic, band, if applicable) \_\_\_\_\_

DESTINATION Disney World ADDRESS 1901 Buena Vista Dr. Lake Buena Vista, FL 32830 PHONE 407-939-1936

all info is f hotel

Out of State  Out of County  Within County  Overnight; give name, address, phone of lodging  
Disney's All-Star Movies Resort

DATE(S) OF TRIP March 1-6, 2024 DEPARTURE TIME 8:45 AM RETURN TIME 12:15 PM

PURPOSE/EDUCATIONAL VALUE This will be their final trip as a class; they voted and chose Disney World almost unanimously.

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

SOURCE OF FUNDING FOR TRIP Fundraising, self, possibly BEF (waiting on answer)

BILL TRIP EXPENSES TO:

- SPONSORING ORGANIZATION
- SCHOOL COUNCIL
- BOARD
- OTHER, SPECIFY senior CLASS Trip acct.

SUPERVISION: (ATTACH LIST OF NAMES OF ADULTS ACCOMPANYING STUDENTS ON TRIP.)

NUMBER OF: STUDENTS 30 ish FACULTY SPONSORS 2 OTHER CHAPERONES 3  
TOTAL # OF PARTICIPANTS 35

ALL CHAPERONES HAVE UNDERGONE THE REQUIRED RECORDS CHECK AND BEEN DESIGNATED BY THE PRINCIPAL/DESIGNEE TO SUPERVISE STUDENTS?  YES  NO

MODE OF TRANSPORTATION:

IS DISTRICT TRANSPORTATION NEEDED?  NO  YES, SEE PROCEDURE 09.36 AP.212.

CERTIFICATED COMMON CARRIER; SPECIFY Frontier Airlines

PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) \_\_\_\_\_

Charles Wheatley  
Signature of Faculty Sponsor

10-19-23  
Date

[Signature]  
Signature of Principal

10/26/23  
Date

[Signature]  
Signature of School Nurse

Date

[Signature]  
Signature of Food Service Director

10/26/23  
Date

(Only needed if field trip will cause students to miss lunch.)

Trip has been  approved  disapproved. Reason for disapproval \_\_\_\_\_

[Signature]  
Signature of Superintendent/Designee

10/26/23  
Date

For overnight and/or out-of-state trips, approval of the Superintendent and/or Board may be required by policy 09.36.

RELATED PROCEDURES:

09.36 AP.211, 09.36 AP.212, 09.36 AP.23