

School Related Student Trip Request Form & Event Specific Emergency Action Plan (EAP)

SUBMIT THIS FORM [ ] ONE WEEK [ ] TWO WEEKS [ ] OTHER, SPECIFY PRIOR TO THE TRIP.

SCHOOL ACPC FACULTY MEMBER(S) SPONSORING TRIP Alex Stinson

TYPE OF TRIP (CHECK ONE): [x] Classroom Field Trip [ ] Class Trip (i.e., junior, senior), specify [ ] Organization/Club Trip, specify [ ] Other (athletic, band, if applicable)

DESTINATION Cheekwood ADDRESS Nashville, TN PHONE 615-356-8000

[x] Out of State [ ] Out of County [ ] Within County [ ] Overnight; give name, address, phone of lodging

DATE(S) OF TRIP 3-24 and 3-25 DEPARTURE TIME 8:00 RETURN TIME 1:30

PURPOSE/EDUCATIONAL VALUE Provides students with authentic real-world learning experience that relates to 3rd grade PBL project

Attach a description of estimated expenses including, but not limited to, lodging, meals, registration, and all other anticipated travel expenses.

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 245 FACULTY SPONSORS 13 OTHER CHAPERONES TOTAL # OF PARTICIPANTS 258

MODE OF TRANSPORTATION IS DISTRICT TRANSPORTATION NEEDED? [ ] NO [ ] YES, SEE PROCEDURE 09.36 AP.212. [ ] CERTIFICATED COMMON CARRIER; SPECIFY [ ] PRIVATE VEHICLE, IF 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

Person contacted at venue to discuss EAP: Person making contact:

Is there an Automated External Defibrillator (AED) on site: [ ] Yes [ ] No If yes, where:

Does the venue have an Emergency Response Team: [ ] Yes [ ] No If yes, how are they contacted:

- School Employee(s) Attending Trip (Please note beside name if employee is CPR trained): Alex Stinson, Josette Carter, Sarah Short, Louara Watson, Ashlyn Carney, Ashlee Jarvis, Morgen White, Monica Blewitts, Shayna Branham, Marika Barnes, Susan Nelson, Jamile Beaver, Cierra Baize

Signature of Faculty Sponsor amy stinn Date 1-20-20

Trip has been [ ] approved [ ] disapproved. Reason for disapproval Signature of Superintendent/Designee 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.1, 09.36 AP.21, 09.36 AP.211, 09.36 AP.212

Review/Revised:9/18/2023