

SCHOOL DISTRICT OF CL/ A  
FIELD TRIP REQUE

APPROVED: [Signature]  
ADMINISTRATIVELY APPROVED  
PENDING BOARD APPROVAL  
April 21, 2016

1. School Requesting: Lakeside JHS

2. Transportation (Check One):  
School Bus(s) \_\_\_\_\_ Private Vehicle(s)  Commercial Carrier \_\_\_\_\_ Other \_\_\_\_\_  
If Commercial Carrier or Other, please state type: \_\_\_\_\_

3. Trip(s) overnight: Yes  No \_\_\_\_\_ Trip(s) out-of-state: Yes  No \_\_\_\_\_

4. Dates of Field Trip\*: 5/20-22 Destination\*: Baton Rouge, LA (LSU)  
\* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: Sea Perch Team

6. If using private vehicles, list drivers you wish to designate as Agents of the Board and attach the necessary Agent of the Board form. Trudi Lawless

7. Educational Value of Field Trip: Cooperative learning, problem solving, real world applications, scholarship opportunities

8. Supporting SSS Benchmark(s) with Narrative(s): Various

9. Number of Students\*: 2 Number of Chaperones\*: 1

10. Cost Per Student: \$275/district is covering Budget Code or Source to be charged: \_\_\_\_\_  
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time\*: 8:00 AM Returning Time\*: 6:00 pm

All county policy and school directives have been reviewed and compliance has been established. This form should be submitted to the appropriate Instructional Division Director or Supervisor. If school buses are being used, the transportation request form should be attached. School bus requisition numbers for each request form are to be listed below.

Bus Requisition Number(s):  
\_\_\_\_\_

[Signature]  
Teacher, Team Leader, Department Head, Etc.  
[Signature] Principal  
[Signature] District Office Approval

SCHOOL DISTRICT OF CLAY  
FIELD TRIP REQUEST

APPROVED: Muller  
ADMINISTRATIVELY APPROVED  
PENDING BOARD APPROVAL  
April 21, 2016

1. School Requesting: OPJH

2. Transportation (Check One):  
School Bus(s) \_\_\_\_\_ Private Vehicle(s) \_\_\_\_\_ Commercial Carrier X Other \_\_\_\_\_  
If Commercial Carrier or Other, please state type: Train

3. Trip(s) overnight: Yes  No \_\_\_\_\_ Trip(s) out-of-state: Yes  No \_\_\_\_\_

4. Dates of Field Trip\*: 2/15-2/19/2017 Destination\*: Washington DC  
\* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: Wildcat Academy

6. If using private vehicles, list drivers you wish to designate as Agents of the Board and attach the necessary Agent of the Board form. \_\_\_\_\_

7. Educational Value of Field Trip: Students will visit historical site ie Arlington National Cemetery, US Capital/Supreme Court Smithsonian Museum.

8. Supporting SSS Benchmark(s) with Narrative(s): SS8A33 - Recognize the contribution of founding fathers, examine the causes, course and consequences of Revolution. Analyze the impact of technological advancements on the economy. Explain the economic impact of government policies.

9. Number of Students\*: 40 Number of Chaperones\*: 4

10. Cost Per Student: 619.00 Budget Code or Source to be charged: \_\_\_\_\_  
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time\*: 2/15 - 3:00 Returning Time\*: 2/19 - 9:00

All county policy and school directives have been reviewed and compliance has been established. This form should be submitted to the appropriate Instructional Division Director or Supervisor. If school buses are being used, the transportation request form should be attached. School bus requisition numbers for each request form are to be listed below.

Bus Requisition Number(s): \_\_\_\_\_

[Signature]  
Teacher, Team Leader, Department Head, Etc.

[Signature] Principal  
District Office Approval

15-16-16  
16  
16

SCHOOL DISTRICT OF CL  
FIELD TRIP REQUE

APPROVED: [Signature]  
Received to Late for March 22, 2016  
Board Meeting  
Received for Information: April 21, 2016

1. School Requesting: Fleming Island

2. Transportation (Check One):

School Bus(s) \_\_\_\_\_ Private Vehicle(s) \_\_\_\_\_ Commercial Carrier \_\_\_\_\_ Other   
If Commercial Carrier or Other, please state type: VANS

3. Trip(s) overnight: Yes  No \_\_\_\_\_ Trip(s) out-of-state: Yes \_\_\_\_\_ No

4. Dates of Field Trip\*: Friday 4/15 Destination\*: Kissimmee  
\* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: Boys Weight Lifting Team

6. If using private vehicles, list drivers you wish to designate as Agents of the Board and attach the necessary Agent of the Board form. \_\_\_\_\_

7. Educational Value of Field Trip: State Meet

8. Supporting SSS Benchmark(s) with Narrative(s): State Meet

9. Number of Students\*: 4 Number of Chaperones\*: 1

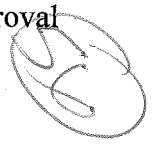
10. Cost Per Student: \_\_\_\_\_ Budget Code or Source to be charged: \_\_\_\_\_  
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time\*: 7:00 AM Returning Time\*: 4/16 Evening

All county policy and school directives have been reviewed and compliance has been established. This form should be submitted to the appropriate Instructional Division Director or Supervisor. If school buses are being used, the transportation request form should be attached. School bus requisition numbers for each request form are to be listed below.

Bus Requisition Number(s): \_\_\_\_\_

Damenyum Springs  
Teacher, Team Leader, Department Head, Etc.  
[Signature]  
Principal  
[Signature]  
District Office Approval



1. School Requesting: MHS NJROTC

APPROVED: [Signature]  
Received to Late for March 22, 2016  
Board Meeting

2. Transportation (Check One):  
School Bus(s) \_\_\_\_\_ Private Vehicle(s) \_\_\_\_\_ Commercial \_\_\_\_\_  
If Commercial Carrier or Other, please state type: SCHOOL

Received for Information: April 21, 2016

3. Trip(s) overnight: Yes  No  Trip(s) out-of-state: Yes  No

4. Dates of Field Trip\*: 21-24 APR Destination\*: ORLANDO, FL  
\* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: NJROTC

6. If using private vehicles, list drivers you wish to designate as Agents of the Board and attach the necessary Agent of the Board form. \_\_\_\_\_

7. Educational Value of Field Trip: DRILL + ACADEMIC COMPETITION

8. Supporting SSS Benchmark(s) with Narrative(s): \_\_\_\_\_

9. Number of Students\*: 4 Number of Chaperones\*: 1

10. Cost Per Student: \_\_\_\_\_ Budget Code or Source to be charged: \_\_\_\_\_  
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time\*: 1200 21 APR Returning Time\*: 1800 24 APR

All county policy and school directives have been reviewed and compliance has been established. This form should be submitted to the appropriate Instructional Division Director or Supervisor. If school buses are being used, the transportation request form should be attached. School bus requisition numbers for each request form are to be listed below.

Bus Requisition Number(s): \_\_\_\_\_

[Signature]  
Teacher, Team Leader, Department Head, Etc.  
[Signature]  
Principal  
[Signature]  
District Office Approval



SCHOOL DISTRICT OF CLAY  
FIELD TRIP REQUEST

APPROVED: [Signature]  
Received to Late for March 22, 2016  
Board Meeting  
Received for Information: April 21, 2016

1. School Requesting: RIDGEVIEW HIGH SCHOOL

2. Transportation (Check one):  
School Bus/s \_\_\_\_\_ Automobile/s 1 Commercial Carrier \_\_\_\_\_ Other \_\_\_\_\_  
If commercial or other, state type: \_\_\_\_\_

3. Trip(s) overnight: yes  no \_\_\_\_\_ Trip(s) out-of-state: yes \_\_\_\_\_ no

4. Dates of Field Trip\*: 4/14 - 4/15 Destination\*: KISSIMMEE CIVIC CENTER  
KISSIMMEE, FL  
\*For school buses . . . if more than one bus is requested, reference bus request form.

5. Group Taking Trip: BOYS WEIGHTLIFTING TEAM (RHS)

6. If using private vehicles, list drivers you wish to designate as Agents of the Board and attach the necessary Agent of the Board Form. TRENTIN O. DAVIS (COACH)

7. Educational Value of Field Trip: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Supporting SSS Benchmark(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Number of Students\*: 2 Number of Chaperones\*: 1

10. Cost Per Student: \_\_\_\_\_ Budget Code or Source to be charged: \_\_\_\_\_  
(Examples: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time\*: 1:45 pm Returning Time\*: 6:00 pm

All county policy and school directives have been reviewed and compliance has been established. This form should be submitted to the appropriate Instructional Division Director or Supervisor. If school buses are being used, the transportation request form should be attached. School bus requisition numbers for each request form are to be listed below.

Bus Requisition Number/s: \_\_\_\_\_  
\_\_\_\_\_

[Signature]  
Teacher, Team Leader, Department Head, Etc.  
[Signature]  
Principal  
[Signature]  
District Office Approval

