SCHOOL DISTRICT OF CLAY COUNTY FIELD TRIP REQUEST
1. School Requesting: de condary Education Det.
2. Transportation (Check one): School Bus/s Automobile/s Commercial Carrier Other/ BOARD BOARD Other/ Automobile/s
3. Trip(s) overnight: yes no Trip(s) out-of-state: yes no
4. Dates of Field Trip*: <u>3-23/25-11</u> Destination*: <u>Orlando</u> , FC.
5. Group Taking Trip: District Science Fair Winkers
<ol> <li>If using private vehicles, list drivers you wish to designate as Agents of the Board and attach the Agent of the Board Form.</li> </ol>
7. Educational Value of Field Trip: Nature of Science
8. Supporting SSS Benchmark(s): 5 C. 6. N. 1 - SC. 912. N. 1
9. Number of Students*: <u>17</u> . Number of Chaperones*: <u>3</u> 10. Cost Per Student: <u>N/A</u> Budget Code or Source to be charged:
11. Departure Time*: 9:00 Am Returning Time*: 12.00 - Midnight
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:
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Kathleon on spice Color Teacher, Team Leader, Department Head, Etc.
Principat / hat
MIS12723 District Office Approval
DEV 7/20/1009

		DISTRICT OF ( FIELD TRIP RE(	PEND	ISTRATIVELY A		
1. School Requesting:	CLAY HIGH	SCHOOL		March 17, 201	1	
2. Transportation (Check School Bus(s) If Commercial Carrie	Private Vehicler or Other, please	e state type:	NTAL VANS		r	
3. Trip(s) overnight: Yes	No	Trip(s) out-of-s	tate: Yes 🖊 No	,		
4. Dates of Field Trip*: <u>1</u> * For School Busesif mor	2 MAY 2011 re than one bus is reque	Destination*	: KINGS BAY	NAVAL BA	SE, GA	
5. Group Taking Trip:	CLAY HIGH	NJROTC				
6. If using private vehicle Agent of the Board form.			as Agents of the	Board and attac	ch the necessary	
7. Educational Value of F SCIENCE CURRICE FACILITY AND	LUM. WE W	ILL TOUR TH	E TRIDENT	SUBMARINE	TRAINING	
8. Supporting SSS Bench	mark(s) with Nar	rrative(s):				
9. Number of Students*:	21	Number of (	Chaperones*:	3		
10. Cost Per Student:	N/A B:	udget Code or Sou xample: Internal Account				
11. Departure Time*: _6	:45 AM	Retur	ning Time*:	30 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):					
	BCG310 MAR = 8 20		Teacher, Tean	A L	Artment Head, Etc.	
SEC-1-2723 SC E. 4/14/2011	condery Educ	ation		Distric	et Office Approval	