

SCHOOL DISTRICT OF CLAY
FIELD TRIP REQUEST

APPROVED: [Signature]
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 17, 2015

1. School Requesting: CLAY H.S.

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

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

4. Dates of Field Trip*: 12/21-12/23 Destination*: Pigeon Forge, TN
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: CLAY WRESTLING

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. NA

7. Educational Value of Field Trip: Seek competition with best teams on regional & national basis.

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

9. Number of Students*: 2025 Number of Chaperones*: 4

10. Cost Per Student: \$225.250 Budget Code or Source to be charged: _____
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 6AM Returning Time*: 9PM

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): _____

James P. Reape - Head Coach
Teacher, Team Leader, Department Head, Etc.

W. Clay Dukes
Principal

[Signature]
District Office Approval

SCHOOL DISTRICT OF CLATSOP
FIELD TRIP REQUEST

APPROVED: [Signature]
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 17, 2015

1. School Requesting: FJHS

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

3. Trip(s) overnight: yes X no _____ Trip(s) out-of-state: yes X no _____

4. Dates of Field Trip*: 3-11-16 to 3-14-16 Destination*: Hill Country, Colorado, etc.
*For school buses... if more than one bus is requested, reference bus request form.

5. Group Taking Trip: FBLA Members

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 participate in team building and leadership workshops, statewide elections and competitive events. They will also be networking with business representatives, college representatives and FBLA members from across the state.

8. Supporting SSS Benchmark(s): 2.0, 4.0, 10.0. Demonstrate communication, comprehension, management, organizational skills, human relations skills and interpersonal skills.

9. Number of Students*: 25 Number of Chaperones*: 2

10. Cost Per Student: 300.00 Budget Code or Source to be charged: _____
(Examples: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 7:00 A.M. Returning Time*: 3:00 P.M.

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 CL
FIELD TRIP REQUE

APPROVED: W. H. H. H.
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 17, 2015

1. School Requesting: FIHS

2. Transportation (Check One): from Orlando -> Home
School Bus(s) _____ Private Vehicle(s) to Orlando 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*: 2/4/16 - 2/7/16 Destination*: Orlando, FL (ESPN Wide World of Sports)
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: JV + Varsity cheerleading

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. *student's parents to return home

7. Educational Value of Field Trip: NA

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

9. Number of Students*: 45-50 Number of Chaperones*: 5-8

10. Cost Per Student: \$400-\$500 Budget Code or Source to be charged: 1200
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 2/4/16 @ 3:30 PM Returning Time*: 2/7/16 @ 7:00 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):

Jaral O'Dell
Teacher, Team Leader, Department Head, Etc.
Thomas Pittman
Principal
W. H. H. H.
District Office Approval

SCHOOL DISTRICT OF CLATSOP
FIELD TRIP REQUEST

APPROVED: [Signature]
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 17, 2015

1. School Requesting: FHS

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*: 1/28/16-1/30/16 Destination*: Tampa FL (FHSAA STATE)
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: Varsity Cheerleading (competition 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. NA

7. Educational Value of Field Trip: NA

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

9. Number of Students*: 25 + 3 coaches + 2-3 chaperones Number of Chaperones*: 2-3

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

11. Departure Time*: 1/28/16 @ 3:00 PM Returning Time*: 1/29/16 or 1/30/16 11:00 PM - 2:00 AM

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 CLATSOP
FIELD TRIP REQUEST

APPROVED: W. H. [Signature]
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 17, 2015

1. School Requesting: FIHS

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*: 1/22/16 - 1/23/16 Destination*: Marianna, FL (FHSAA Regional)
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: Varsity cheerleaders (competition 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. Kim Bassler, Janae O'Dell, Jessica McFarland, Ellie Snider, Christy Duhon, Kim Reimel, Adrienne Grace,

7. Educational Value of Field Trip: Laura Van Hook, etc.
NA

8. Supporting SSS Benchmark(s) with Narrative(s): _____
NA

9. Number of Students*: 25 Number of Chaperones*: 4-5

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

11. Departure Time*: 1/22/16 @ 3:00 PM Returning Time*: 1/23/16 @ 7:00 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): _____

Janae O'Dell
Teacher, Team Leader, Department Head, Etc.
Thomas Alderman
Principal
W. H. [Signature]
District Office Approval

APPROVED: Muller
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 17, 2015

SCHOOL DISTRICT OF CLAY CO
FIELD TRIP REQUEST

- 1. School Requesting: F I H S
- 2. Transportation (Check one):
School Bus/s _____ Automobile/s 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*: 1/7-10/16 Destination*: Tongva
*For school buses . . . if more than one bus is requested, reference bus request form.
- 5. Group Taking Trip: Band
- 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. Each parent of their own child - TBA
- 7. Educational Value of Field Trip: Students are auditioned & selected to represent Clay Co & F I H S. They receive instruction from world renowned conductors & perform with the best students from all over the state
- 8. Supporting SSS Benchmark(s): MU912531, 522
- 9. Number of Students*: 4 Number of Chaperones*: 2
- 10. Cost Per Student: 0 Budget Code or Source to be charged: 0
(Examples: Internal Accounts, 5100-331, Athletic Departments)
- 11. Departure Time*: 8 AM Returning Time*: 1 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: _____

Thomas Pittman
Teacher, Team Leader, Department Head, Etc.
Principal
Muller
District Office Approval

SCHOOL DISTRICT OF CLATSOP
FIELD TRIP REQUEST

APPROVED: M. Williams
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 17, 2015

1. School Requesting: FIHS

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*: 12/4/15 - 12/5/15 Destination*: Tampa Convention Center
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: Varsity + JV cheerleaders

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. Kim Bassler, Janae O'Dell, Amy Mercen, Jessica McFarland, Kim Reimer, Nahuy Edelenbos, Heather LaBelle, Adrienne

7. Educational Value of Field Trip: NA Grace, Kristi Seybolt, Laura Van Hook, Christy Duhon, Etc.

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

9. Number of Students*: 45-50 Number of Chaperones*: 5-6

10. Cost Per Student: \$52 Budget Code or Source to be charged: 1200 (cheerleading)
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 12/4/15 3:00 pm Returning Time*: 12/5/15 11:00 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):

Janae O'Dell
Teacher, Team Leader, Department Head, Etc.
Thomas Kilmom (P)
Principal

M. Williams
District Office Approval

APPROVED: [Signature]
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 17, 2015

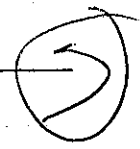
SCHOOL DISTRICT OF CLAY CO
FIELD TRIP REQUEST

1. School Requesting: FFHS
2. Transportation (Check one):
School Bus/s _____ Automobile/s 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*: 12/3-7 Destination*: Tallahassee
*For school buses . . . if more than one bus is requested, reference bus request form.
5. Group Taking Trip: Band
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. ~~Teacher~~ Mara Rose - Rental car
7. Educational Value of Field Trip: Students selected to represent Clay Co/ FFHS in Tri-State Honor Band. Student receive education from world renowned educators & perform w/ the best students from the tri-state area
8. Supporting SSS Benchmark(s): MU912531, 522
9. Number of Students*: 8 Number of Chaperones*: 0 provided by PSU
10. Cost Per Student: 0 Budget Code or Source to be charged: 0
(Examples: Internal Accounts, 5100-331, Athletic Departments)
11. Departure Time*: 8AM Returning Time*: 10PM

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 CLATSOP
FIELD TRIP REQUEST

APPROVED: [Signature]
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 17, 2015

1. School Requesting: FFHS

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

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

4. Dates of Field Trip*: 11/21-22 Destination*: St. Pete
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: Band

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. N/A

7. Educational Value of Field Trip: Competitor - State Championships

8. Supporting SSS Benchmark(s) with Narrative(s): MU.912-S.3.5, MU.912.534, MU.912.533, MU.912.532 and many others



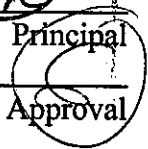
9. Number of Students*: 180 Number of Chaperones*: 25

10. Cost Per Student: 0 Budget Code or Source to be charged: 0
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 5 AM Returning Time*: 4 AM

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.
Thomas Keltman 
[Signature] 
Principal
District Office Approval 

SCHOOL DISTRICT OF CLATSOP
FIELD TRIP REQUEST

APPROVED: M. Blum
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 17, 2015

1. School Requesting: F.I.H.S.

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

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

4. Dates of Field Trip*: 10/30 - 11/1/2015 Destination*: Lake Yale Baptist Conference Center
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: FBLA members

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 participate in leadership training workshops, team building activities and networking. They will also be involved in management and organizational skills building/decision making skills which will be used in leading their local school chapter as officers and members.

8. Supporting SSS Benchmark(s) with Narrative(s): 2.0, 4.0 10.0, 5.0 Management, organizational skills, communication, time management, human relations and interpersonal skills.

9. Number of Students*: 30 Number of Chaperones*: 2

10. Cost Per Student: \$250.00 Budget Code or Source to be charged: Internal
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 12:00 p.m. (noon) Returning Time*: 2:00 p.m.

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): _____

Brenda S. Kulland
Teacher, Team Leader, Department Head, Etc.
Thomas Pittman
M. Blum Principal
District Office Approval

SCHOOL DISTRICT OF CLATSOP
FIELD TRIP REQUEST

APPROVED: M. H. [Signature]
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 17, 2015

1. School Requesting: MMS

2. Transportation (Check One):
School Bus(s) _____ Private Vehicle(s) X 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*: Oct. 23, 2015 Destination*: Deland, FL
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: select chorus students

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 be attending a choral workshop in which they will rehearse and perform with a nationally acclaimed conductor. Also they will tour the campus and discuss college admission.

8. Supporting SSS Benchmark(s) with Narrative(s): MU.912.S.3.1 Synthesize a broad range of musical skills by performing a varied repertoire. MU.912.P.3.2 Interpret and perform expressing elements indicated by the musical score and/or conductor

9. Number of Students*: 12 Number of Chaperones*: 2

10. Cost Per Student: FBD \$155-65 Budget Code or Source to be charged: internal accounts
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 6:00 am 10/2 Returning Time*: 12:00 pm/10-3

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):
N/A

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



SCHOOL DISTRICT OF CLAY
FIELD TRIP REQUEST

APPROVED: [Signature]
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 17, 2015

1. School Requesting: MHS

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

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

4. Dates of Field Trip*: 1/22, 1/23/2016 Destination*: Wakulla H.S.
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: Westling

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: _____

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

9. Number of Students*: 14 Number of Chaperones*: 2

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

11. Departure Time*: 9 am Returning Time*: 10 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
District Office Approval [Signature]

SCHOOL DISTRICT OF CLATSOP
FIELD TRIP REQUEST

APPROVED: Mellinger
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 17, 2015

1. School Requesting: MHS

2. Transportation (Check One):

School Bus(s) _____ Private Vehicle(s) _____ Commercial Carrier _____ Other X
If Commercial Carrier or Other, please state type: VAN

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

4. Dates of Field Trip*: 12/18-20/2015 Destination*: St. Clair H.S.
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: Wrestling 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: _____

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

9. Number of Students*: 14 Number of Chaperones*: 2

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

11. Departure Time*: 9am Returning Time*: 10pm

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 CL,
FIELD TRIP REQUE

APPROVED: [Signature]
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 17, 2015

1. School Requesting: Oakleaf High School

2. Transportation (Check One):

School Bus(s) _____ Private Vehicle(s) _____ Commercial Carrier _____ Other Van Rental
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*: 2/26-28/16 Destination*: Orlando, FL
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: KMDT

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. N/A

7. Educational Value of Field Trip: KMDT will use a variety of thinking skills to analyze and evaluate dance. They will compare choreographers, intent and the audience, members interpretation of meaning. They will evaluate personal actions and discipline

8. Supporting SSS Benchmark(s) with Narrative(s): D.A.K.C.3 The process of critizing work of art lead to development of critical thinking skills transferable to other contexts

9. Number of Students*: 15 Number of Chaperones*: 3

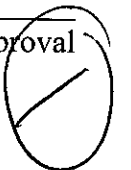
10. Cost Per Student: \$369.00 Budget Code or Source to be charged: KMDT
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 7⁰⁰ am Returning Time*: 5⁰⁰ 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 CL
FIELD TRIP REQU

APPROVED: Michelle Miller
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 17, 2015

1. School Requesting: OPHS

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*: 10/3-4/15 Destination*: Deborah Stetson Univ.
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: select chorus students

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 participate in an Honor Choir during winter a college level choral director will perform musical selections learned as well as attending a concert of Stetson Chorus ~~the~~ about Music students

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

9. Number of Students*: 8 Number of Chaperones*: 3

10. Cost Per Student: \$190.00 Budget Code or Source to be charged: 2200
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 6:30am. Returning Time*: 11:00pm

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): _____

Michelle Miller
Teacher, Team Leader, Department Head, Etc.
Michelle Miller Principal
District Office Approval

SCHOOL DISTRICT OF CLATSOP
FIELD TRIP REQUEST

APPROVED: Mellinger
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 17, 2015

1. School Requesting: RHS

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

3. Trip(s) overnight: yes _____ no X Trip(s) out-of-state: yes X no _____

4. Dates of Field Trip*: SATURDAY 12 October 2015 Destination*: Cairo H.S., Cairo, GA
*For school buses . . . if more than one bus is requested, reference bus request form.

5. Group Taking Trip: NJ ROTC Cadets

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: Orienteering, Rifle shooting and Academic Competitions

8. Supporting SSS Benchmark(s): SS.B. 2.4.1 S.S.C. 1.4.1
S.S.C. 1.4.2 S.S.C. 1.4.3 S.S.C. 2.4.3
A.T. 2.1.4.2 H.E.B. 3.4.4 A.T. 1.4.2

9. Number of Students*: 6 Number of Chaperones*: 1

10. Cost Per Student: -0- Budget Code or Source to be charged: _____
(Examples: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 0600 Returning Time*: 1700

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: _____

Teacher, Team Leader, Department Head, Etc.

Principal

District Office Approval



SCHOOL DISTRICT OF CL
FIELD TRIP REQUE

APPROVED: [Signature]
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 17, 2015

1. School Requesting: Ridgeview High
2. Transportation (Check one):
School Bus/s 3 Automobile/s _____ Commercial Carrier _____ Other X
If commercial or other, state type: enterprise
3. Trip(s) overnight: yes X no _____ Trip(s) out-of-state: yes _____ no _____
4. Dates of Field Trip*: 9/25-9/27 Destination*: Stuart, FL Swimming Invitational
*For school buses . . . if more than one bus is requested, reference bus request form.
5. Group Taking Trip: RHS Swim 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: Athletics
Only affects 1 school day
NOT the entire team
8. Supporting SSS Benchmark(s): _____
9. Number of Students*: 10 Number of Chaperones*: 2
10. Cost Per Student: 0 Budget Code or Source to be charged: 1113
(Examples: Internal Accounts, 5100-331, Athletic Departments)
11. Departure Time*: 7:30 am 9/25 Returning Time*: 6:00 pm 9/27

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: Mick Fitzgerald
Received to Late for August 27, 2015
Board Meeting
Received for Information: September 17, 2015

RHS

1. School Requesting: _____

2. Transportation (Check one):
School Bus/s _____ Automobile/s 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*: Sept 12 Destination*: Cairo H.S. Cairo GA
*For school buses . . . if more than one bus is requested, reference bus request form.

5. Group Taking Trip: ROTC Cadets (6)

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. N/A

7. Educational Value of Field Trip: To compete in the Cairo NJ ROTC Triathlon

8. Supporting SSS Benchmark(s): N/A

9. Number of Students*: 6 Number of Chaperones*: 1

10. Cost Per Student: -0- Budget Code or Source to be charged: _____
(Examples: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 0500 Returning Time*: 1700

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: _____

Teacher, Team Leader, Department Head, Etc.

Principal Mick Fitzgerald

District Office Approval

6