

SCHOOL DISTRICT OF CLAY (
FIELD TRIP REQUEST

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

1. School Requesting: CLAY HIGH SCHOOL

2. Transportation (Check One):

School Bus(s) Private Vehicle(s) Commercial Carrier [checked] Other

If Commercial Carrier or Other, please state type: CHARTER BUS

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

4. Dates of Field Trip*: 19 NOV 2015 Destination*: NAVAL STATION KINGS BAY, GA

* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: CLAY HIGH 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: STUDENTS WILL TOUR THE TRIDENT SUBMARINE TRAINING FACILITY AND THEN TOUR SSBN 742, THE USS WYOMING. THE FIELD TRIP IS IN DIRECT SUPPORT OF THE NAVAL SCIENCE CURRICULUM.

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

9. Number of Students*: 30 Number of Chaperones*: 5

10. Cost Per Student: \$5.00 (LUNCH) Budget Code or Source to be charged:
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 10:30 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] M. J. Boyer
Teacher, Team Leader, Department Head, Etc.
[Signature] W. Cary Dick
Principal
[Signature]
District Office Approval

SCHOOL DISTRICT OF CLAY
FIELD TRIP REQUEST

APPROVED: Michelle Hignite
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
November 17, 2015

1. School Requesting: CHS

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*: Dec 10-11 Destination*: EPCOT
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: Select 70 chorus 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: Sing @ Candlelight Processional @ Epcot with professional singers and orchestra

8. Supporting SSS Benchmark(s) with Narrative(s): MUA 1.3.1 MUA 1.3.2
MUA 1.3.3 MUA 3.3.1

9. Number of Students*: 70 Number of Chaperones*: 10

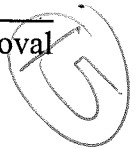
10. Cost Per Student: \$75 Budget Code or Source to be charged: _____
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 11:00 AM Dec 10 Returning Time*: Midnight or 1:00 Dec 11

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):

John Brazell
Teacher, Team Leader, Department Head, Etc.
W. Cary Deeks
Principal
Michelle Hignite
District Office Approval



SCHOOL DISTRICT OF CLAY ()
FIELD TRIP REQUEST

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

1. School Requesting: CLAY HIGH SCHOOL

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

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

4. Dates of Field Trip*: 18-19 DEC 2015 Destination*: NORTH COBB HS, KENNESAW, GA
* 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: STUDENT WILL COMPETE IN AN AREA 12 SANCTIONED ACADEMIC COMPETITION IN DIRECT SUPPORT OF THE NAVAL SCIENCE CURRICULUM. ON THE WAY UP TO GEORGIA NORTH COBB HS THE CADETS WILL TOUR THE MUSEUM OF AVIATION IN WARNER-ROBINS, GA.

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

9. Number of Students*: 10 Number of Chaperones*: 2

10. Cost Per Student: \$25.00 Budget Code or Source to be charged: _____
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 8:00 AM 18 DEC Returning Time*: 10:30 PM 19 DEC

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: Melissa
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
November 17, 2015

1. School Requesting: Clay High

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*: April 29 2016 - May 1 2016 Destination*: Charlotte NC
* 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, _____

7. Educational Value of Field Trip: Concert Festival

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

9. Number of Students*: 50 Number of Chaperones*: 10

10. Cost Per Student: 500⁰⁰ Budget Code or Source to be charged: _____
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 12:00 Noon Returning Time*: 1:00 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): _____

Teacher, Team Leader, Department Head, Etc.
Mr. Cary Deeks
Principal
Melissa
District Office Approval



APPROVED: [Signature]

Received to Late for October 15, 2015 Board Meeting

Received for Information: November 17, 2015

SCHOOL DISTRICT OF CL
FIELD TRIP REQUE

1. School Requesting: Fleming Island High School

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*: Oct 30 - Nov. 1 Destination*: University of Florida, GAINESVILLE, FL
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: Debate Club - Fleming Island High School

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: This trip will encourage the use of speech and analytical debate on the campus of FIHS. As students improve their skills in this area, their cohorts will be motivated to enhance their abilities in speech and debate as well.

8. Supporting SSS Benchmark(s) with Narrative(s): Since this is a tool to enhance meaningful analysis, and presentation, it supports SSS Benchmarks throughout the curriculum.

9. Number of Students*: 20 Number of Chaperones*: 5

10. Cost Per Student: 70 ^{450 registration} hotel room (2 nights) Budget Code or Source to be charged: _____
120 (example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 8:00am 10/30/2015 Returning Time*: 7:15 11/2/2015

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): _____

Bonita Saunders
Teacher, Team Leader, Department Head, Etc.
Thomas Pittman (PP)
Principal
[Signature]
District Office Approval

SCHOOL DISTRICT OF CL.
FIELD TRIP REQUEST

APPROVED: [Signature]

Received to Late for October 15, 2015
Board Meeting

Received for Information: November 17, 2015

1. School Requesting: Flamingo Technical High School

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*: 10/30-10/31 Destination*: Lake Wales FL
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: Flamingo Technical High School

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. Jennifer Ho

7. Educational Value of Field Trip: Cross County Regional Meet

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

9. Number of Students*: 4 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*: 8:00am Returning Time*: 12:00pm

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): _____

Teacher, Team Leader, Department Head, Etc.
Thomas Pittman (P)

[Signature] Principal

District Office Approval

SCHOOL DISTRICT OF CLAY
FIELD TRIP REQUEST

APPROVED: Madeline Wright

Received to Late for October 15, 2015
Board Meeting

Received for Information: November 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*: 10/30 - 10/31 Destination*: Orlando, FL
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: XC GIRLS TEAM VARSITY REGIONAL MEET

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. SUZANNE BAILEY (COACH) CHRISTINE FRANZONI (PARENT)

7. Educational Value of Field Trip: _____

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

9. Number of Students*: 8 Number of Chaperones*: 2

10. Cost Per Student: \$46.25 Budget Code or Source to be charged: _____
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 2:00 PM 10/30 Returning Time*: 2:00 PM 10/31

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 Korman
Teacher, Team Leader, Department Head, Etc.
Madeline Wright
Principal
District Office Approval

SCHOOL DISTRICT OF CLATSOP
FIELD TRIP REQUEST

APPROVED: [Signature]
Received to Late for October 15, 2015

Board Meeting

Received for Information: November 17, 2015

- 1. School Requesting: Fleming Island
- 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*: 11/13-11/14 Destination*: Stuart Fl (Sallisish Crdr.)
* For School Buses...if more than one bus is requested, reference bus request form.
- 5. Group Taking Trip: F114 Swim Team State Meet
- 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*: 12 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*: 8:10 AM Returning Time*: 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): _____

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

SCHOOL DISTRICT OF CLATSOP
FIELD TRIP REQUEST

APPROVED: [Signature]
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
November 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: east coast transportation

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

4. Dates of Field Trip*: NOV 20, 2015 Destination*: Cumberland Island Ga
* For School Buses...if more than one bus is requested, reference bus request form. state park

5. Group Taking Trip: Aice Art, AP Art, NAHS, Art 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. N/A

7. Educational Value of Field Trip: The students will gain an understanding of how to use tools, digital media technology in a real world setting. how to elicit a variety of responses through image making and gain understanding of historical, cultural values and making connections, via the real world to the Arts.

8. Supporting SSS Benchmark(s) with Narrative(s): See attached for verbal.
VA.912.C.2.2
VA.912.0.1.1

9. Number of Students*: 33 Number of Chaperones*: 3

10. Cost Per Student: \$85 Budget Code or Source to be charged: 3522 NAHS
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 7:00 am Returning Time*: 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):

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

SCHOOL DISTRICT OF CLATSOP
FIELD TRIP REQUEST

APPROVED: Muller
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
November 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: Daytona - Orlando Transit Service

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

Charter Buses

4. Dates of Field Trip*: 12/12/15 - 12/13/15 Destination*: Walt Disney World - Candlelight Processional
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: Fleming Island HS Chorus

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 work with a Disney Conductor, sing with the Liberty Voices, the Disney Chorus, and a 50 piece orchestra. Students will learn and memorize 14 difficult songs and perform them at Epcot.

8. Supporting SSS Benchmark(s) with Narrative(s): Student sings alone and w/ others, a varied repertoire of music (MU.A.1.4) Student understands music in relation to culture and history. (MU.C.1.4)

9. Number of Students*: 120 Number of Chaperones*: 18

10. Cost Per Student: \$100.00 Budget Code or Source to be charged: _____
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 12/12 7 AM Returning Time*: 12/14 12 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):

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

SCHOOL DISTRICT OF CLAY
FIELD TRIP REQUEST

APPROVED: Mull/Wright
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
November 17, 2015

1. School Requesting: KHHS

2. Transportation (Check One):
School Bus(s) _____ Private Vehicle(s) Parents 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*: 12/28-12/30 Destination*: Clearwater TRCS
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: Girls Basketball

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. parents driving own children

7. Educational Value of Field Trip: Basketball Christmas Tournament

8. Supporting SSS Benchmark(s) with Narrative(s): Christmas Tournaments

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

10. Cost Per Student: 0 Budget Code or Source to be charged: 1107
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 10 am 12/28 Returning Time*: 7pm 12/30

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):

Walter
Teacher, Team Leader, Department Head, Etc.
Bryan
Principal
Mull/Wright
District Office Approval



SCHOOL DISTRICT OF CLAY
FIELD TRIP REQUEST

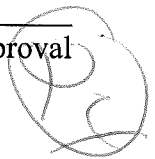
APPROVED: [Signature]
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
November 17, 2015

1. School Requesting: Middleburg High School
2. Transportation (Check One):
School Bus(s) _____ Private Vehicle(s) _____ Commercial Carrier Other _____
If Commercial Carrier or Other, please state type: flight airline (unknown)
3. Trip(s) overnight: Yes No _____ Trip(s) out-of-state: Yes No _____
4. Dates of Field Trip*: 3/10/15-3/13/15 Destination*: Atlanta, GA
* For School Buses...if more than one bus is requested, reference bus request form.
5. Group Taking Trip: TV Production
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 attend workshops by industry professionals, participate in on-site contests and listen to guest speakers who are top in news/film industry
8. Supporting SSS Benchmark(s) with Narrative(s): _____
9. Number of Students*: 16? Number of Chaperones*: 2
10. Cost Per Student: \$950 Budget Code or Source to be charged: internal acct.
(example: Internal Accounts, 5100-331, Athletic Departments)
11. Departure Time*: AM, TBA Returning Time*: PM, TBA

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):

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



STN CONVENTION 2016 PLANNER

Thursday, March 10th – Sunday, March 13th, 2016

Atlanta Marriott Marquis, Atlanta, GA

265 Peachtree Center Avenue Atlanta, Georgia 30303 USA

REGISTRATION:

Student Registration	\$100.00 per student
Teacher Registration	\$100.00 per teacher
Chaperone Registration	\$100.00 per chaperone

All students must be fully registered attendees
All teachers must be fully registered attendees
All chaperones must be fully registered attendees

HOTEL:

Hotel Rooms	\$ 196.04 includes tax
❖ State of Georgia may impose an additional \$5 per room per night fee	

Up to 4 per room - single roll-a-ways allowed in king rooms only, \$20.00 a night. Rooms include in-room internet access. Note: We highly recommend you stay at the Marriott to be fully involved in all convention activities and to help STN meet its room block, thereby covering convention expenses.

CONTESTS:

Contest Fee:	\$15.00 per student
Crazy 8s	\$100.00 per team
w/ table/electric	\$115.00 per team

ONE contest per student
Unlimited number of students (edit in your own location)
Unlimited number of students (w/ table and electric)

TRAVEL INFORMATION:

Hartsfield-Jackson Atlanta

International Airport (ATL)

6000 N Terminal Pkwy, Atlanta, GA 30320

OVERVIEW TENTATIVE SCHEDULE

(Subject to change)

Thursday, March 10, 2016

7:30AM Crazy 8s contest
Various Training Sessions
8:00PM Opening Ceremony

Friday, March 11th, 2016

8:00AM-6:00PM On-Site contests
8:00AM-5:00PM Exhibit Booths Open
8:00AM-6:00PM Professional Sessions
8:00PM Broadcast Excellence/Film Excellence/US ED TV Awards

Saturday, March 12th, 2016

8:00AM-6:00PM On-Site contests
8:00AM-5:00PM Exhibit Booths Open
8:00AM-6:00PM Professional Sessions
8:00PM-10:00PM STN Party

Sunday, March 13th, 2016

10:00AM Closing Ceremony and Awards

SAMPLE COST PER STUDENT

Registration	\$ 100.00
Hotel (\$ per night/taxes incl.)	
4 nights/4 per room	\$196.04
1 Contest	15.00
1 Training Session	40.00
Crazy 8s	10.00
(Based on 10 students)	
Airfare	400.00
(Varies per city)	
Food	160.00
(\$40.00 per day/4 days)	
Incidentals	50.00
Total:	\$971.04

APPROVED: [Signature]
Received to Late for October 15, 2015
Board Meeting
Received for Information: November 17, 2015

SCHOOL DISTRICT OF CLATSOP
FIELD TRIP REQUEST

1. School Requesting: Orange Park High School (band)

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

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

4. Dates of Field Trip*: 10/17/15 Destination*: Louisa HS (Valdosta, GA)
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: Marching 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: To perform in a supportive environment, while receiving valuable feedback from certified judges; to also watch other bands perform.

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

9. Number of Students*: 85 Number of Chaperones*: 9

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

11. Departure Time*: 8:30AM (10/17/15) Returning Time*: 12:30AM (10/18/15)

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
District Office Approval

APPROVED: Mabel [Signature]

Received to Late for October 15, 2015
Board Meeting

Received for Information: November 17, 2015

**SCHOOL DISTRICT OF CLAY
FIELD TRIP REQUEST**

1. School Requesting: Orange Park High School (band)

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

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

4. Dates of Field Trip*: 11/07/15-11/08/15 Destination*: N. Marion HS (Citra, FL) Beach Grandstand (Tampa, FL)
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: Marching 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: To perform in a competitive environment, while receiving valuable feedback from qualified judges; to also watch other bands perform.

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

9. Number of Students*: 85 Number of Chaperones*: 9

10. Cost Per Student: \$20 (fuel) Budget Code or Source to be charged: Internal Acct.
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 8:30 AM (11/07/15) Returning Time*: 11:00 PM (11/08/15)

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
District Office Approval

SCHOOL DISTRICT OF CLATSOP
FIELD TRIP REQUEST

APPROVED: M. DeFuria
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
November 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*: 1/29-30/16 Destination*: Deland, FL - State 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. Allison Arthur

7. Educational Value of Field Trip: students will participate in an honor choral clinic with a collegiate level choral conductor & perform musical selections learned

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

9. Number of Students*: 6 Number of Chaperones*: 2

10. Cost Per Student: \$700 Budget Code or Source to be charged: 2200
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 10:30am Returning Time*: 11: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): _____

Allison Arthur
Teacher, Team Leader, Department Head, Etc.
M. DeFuria Principal
District Office Approval

SCHOOL DISTRICT OF CL
FIELD TRIP REQU

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

1. School Requesting: RHS

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*: 12/11/15 - 12/12/15 Destination*: Orlando, FL
*For school buses . . . if more than one bus is requested, reference bus request form.

5. Group Taking Trip: 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. _____

7. Educational Value of Field Trip: competition for cheerleading

8. Supporting SSS Benchmark(s): _____

9. Number of Students*: 26 Number of Chaperones*: 2

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

11. Departure Time*: 8am Returning Time*: 8pm

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

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SCHOOL DISTRICT OF CLAY
FIELD TRIP REQUEST

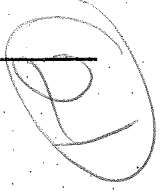
APPROVED: [Signature]
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
November 17, 2015

1. School Requesting: RHS
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*: 1/22/16 - 1/23/16 Destination*: Marianna, FL
*For school buses . . . if more than one bus is requested, reference bus request form.
5. Group Taking Trip: 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. _____
7. Educational Value of Field Trip: Competition for cheerleading
8. Supporting SSS Benchmark(s): _____
9. Number of Students*: 26 Number of Chaperones*: 2
10. Cost Per Student: _____ Budget Code or Source to be charged: Athletic Department
(Examples: Internal Accounts, 5100-331, Athletic Departments)
11. Departure Time*: 10 AM Returning Time*: 8 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: Mell / [Signature]
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
November 17, 2015

1. School Requesting: RHS

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*: 1/28/16 - 1/29/16 Destination*: Tampa, FL
*For school buses . . . if more than one bus is requested, reference bus request form.

5. Group Taking Trip: 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. _____

7. Educational Value of Field Trip: Competition for cheerleading

8. Supporting SSS Benchmark(s): _____

9. Number of Students*: 26 Number of Chaperones*: 2

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

11. Departure Time*: 10 AM Returning Time*: 1:30 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: _____

Teacher, Team Leader, Department Head, Etc.

Principal

District Office Approval

