

SCHOOL DISTRICT OF CLATSOP
FIELD TRIP REQUEST

APPROVED: Wendy King
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 18, 2014

1. School Requesting: Lakeside Junior

2. Transportation (Check one):
School Bus/s _____ Automobile/s _____ Commercial Carrier _____ Other X
If commercial or other, state type: Parents are responsible for dropping off and picking up their child.

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

4. Dates of Field Trip*: 10-25-14 to 10-26-14 Destination*: Camp Chewawaw
*For school buses . . . if more than one bus is requested, reference bus request form.

5. Group Taking Trip: Lakeside Ladies

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: They need to earn incentives to help them accomplish goals. Team building activities to build new relationships.

8. Supporting SSS Benchmark(s): n/a

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

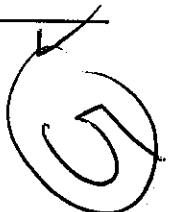
10. Cost Per Student: 0 Budget Code or Source to be charged: _____
(Examples: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 4pm Returning Time*: 11am

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: _____

Dana Marshall
Teacher, Team Leader, Department Head, Etc.
John R. King
Principal
Wendy King
District Office Approval



August 21, 2014

Mr. Wingate,

Once again, we would like to bring our group, Lakeside Ladies, to Camp Chowenwaw and hope that you will approve.

Camp Chowenwaw Group Building/Incentive Field Trip

This year the girls need to earn 60 points to attend this trip. We will be sending permission slips home to parents.

Safety

We will have all emergency contact information for each student.

Our school nurse, Pat Lavigne, will be attending the overnight trip.

Night staff- There will be two rotations of 3 adults which each rotation will include one male (the males are the mentor's spouses) They will not be permitted in the accommodations. Their purpose is solely for overnight supervision/patrol.

Accommodations- There are five cottages that sleep eight each (40 students total) & two cottages that sleeps 6 adults each.

We will have on the hour student head counts.

Food

Friday night dinner- Hot dogs, pre-packaged chips, Gatorade and bottled water.

Saturday morning breakfast- Donuts and juice boxes

Transportation

Parents will be responsible for drop off to the Camp Chowenwaw by 4pm and pick up by 11 am.

I hope that you will approve this incentive trip for the Lakeside Ladies. If you should have any questions, please feel free to contact me.

Sincerely,

Dena McNider

ESE Assistant Language Impaired Unit

Lakeside Junior High

www.lakesideladies.wix.com/lakeside-ladies

Camp Chowenwaw Park

*Clay County
Division of Parks
& Recreation*

1517 Ball Road
Green Cove Springs,
FL 32043

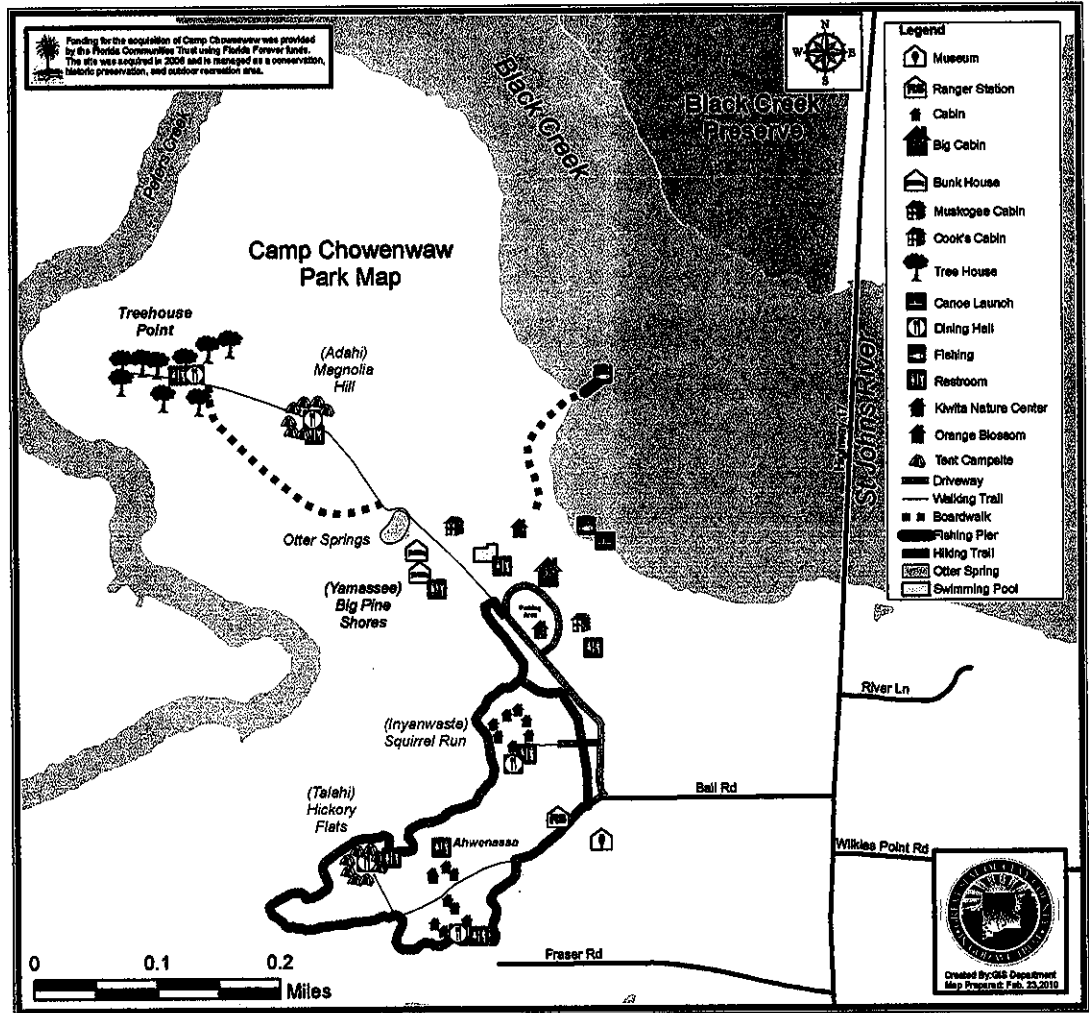
(904) 529-8058

parks.claycountygov.com

Walking Distances

(Approximate feet from closest parking)

Ahwenassa	450
Big Pine Shores	300
Cook's Cabin	85
Hickory Flats	995
Kiwita	275
Magnolia Hill	1135
Muscogee	450
Squirrel Run	110
Treehouse Point	1600



APPROVED: Mell Wright

Received to Late for August 21, 2014
Board Meeting

Receive For Information: September 18, 2014

**SCHOOL DISTRICT OF CLAY
FIELD TRIP REQUEST**

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*: 9/12-9/13 Destination*: Tallahassee
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: Volleyball team (varsity)

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: The volleyball team will have the opportunity to play competition similar to what they will face in the state playoffs.

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

9. Number of Students*: 11 Number of Chaperones*: 22

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

11. Departure Time*: 10am 9/12 Returning Time*: 9/13

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): _____

Arlene Smart
Teacher, Team Leader, Department Head, Etc.

Principal

District Office Approval [Signature]

SCHOOL DISTRICT OF CL
FIELD TRIP REQUI

APPROVED: Michelle Winger
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 18, 2014

1. School Requesting: MHS

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 3-4, 2014 Destination*: Deland, FL
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: 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 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.912.53.1 Synthesize a broad range of musical skills by performing a varied repertoire. MU.912.03.2 Interpret and perform expressive elements indicated by the musical score and/or conductor

9. Number of Students*: 12 Number of Chaperones*: 4

10. Cost Per Student: \$55-65 Budget Code or Source to be charged: internal accounts
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 6:00 am 10/3 Returning Time*: 12:00 am 10/4

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

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

SCHOOL DISTRICT OF C
FIELD TRIP REQ

APPROVED: M. H. [Signature]
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 18, 2014

1. School Requesting: MHS

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*: 9/25-29 Destination*: UNF Jacksonville, FL
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: 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 be attending a choral workshop in which they will rehearse and perform with a nationally acclaimed conductor. Plus they will see first hand a college campus and discuss 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.O.3a Interpret and perform expressive elements indicated by the musical score and/or conductor

9. Number of Students*: 12 Number of Chaperones*: 4-5

10. Cost Per Student: \$67-70 Budget Code or Source to be charged: Internal
(example: Internal Accounts, 5100-331, Athletic Departments)

11. Departure Time*: 2:00 pm Sept 25 Returning Time*: 6-7 pm Sept. 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):
W/A

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

SCHOOL DISTRICT OF CI
FIELD TRIP REQU

APPROVED: [Signature]
Received to Late for August 21, 2014
Board Meeting
Receive For Information: September 18, 2014

1. School Requesting: Middleburg K

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*: 9/12-13/14 Destination*: Tallahassee (Chiles HS)
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: Varsity Volleyball

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*: 17 Number of Chaperones*: 3

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

11. Departure Time*: TBA Returning Time*: TBA
[Signature] [Signature]

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: M. J. [Signature]
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 18, 2014

1. School Requesting: Middleburg H.S.

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*: 9/26-27/14 Destination*: Leon HS - Tallahassee
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: JV Volleyball

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*: 16 Number of Chaperones*: 2

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

11. Departure Time*: TBA Returning Time*: 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): _____

Cassie Brewster
Teacher, Team Leader, Department Head, Etc.
[Signature]
Principal

District Office Approval [Signature]

SCHOOL DISTRICT OF CL
FIELD TRIP REQUI

APPROVED: [Signature]
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 18, 2014

1. School Requesting: Middleburg HS

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 10-4/5/14 Trip(s) out-of-state: Yes _____ No

4. Dates of Field Trip*: 10/17-18/14 Destination*: Orlando
* For School Buses...if more than one bus is requested, reference bus request form.

5. Group Taking Trip: Freshman Volleyball

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*: 10 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*: TBA Returning Time*: 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): _____

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

SCHOOL DISTRICT OF CLATSOP
FIELD TRIP REQUEST

APPROVED: Michelle Wright
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 18, 2014

1. School Requesting: RHS

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

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

4. Dates of Field Trip*: NOV 14 Destination*: Brunswick, GA
*For school buses... if more than one bus is requested, reference bus request form.

5. Group Taking Trip: NJ ROTC Orienteering 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: A.T. 4.1.4.2, H.E. C. 2.4.4
H.E. B. 1.4.1, S.C. B. 1.4.1, S.C. G. 1.4.1
S.C. D. 2.4.1, H.E. B. 1.4.3, A.E. B. 2.4.4
H.E. B. 3.4.5, A.T. 6.1.4.2, H.E. B. 3.4.1

8. Supporting SSS Benchmark(s): To compete in an orienteering field meet competition

9. Number of Students*: 14 Number of Chaperones*: 1

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

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

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 Navy Bus

Teacher/Team Leader/Department Head, Etc.

Principal

District Office Approval



SCHOOL DISTRICT OF CLAY
FIELD TRIP REQUEST

APPROVED: [Signature]
ADMINISTRATIVELY APPROVED
PENDING BOARD APPROVAL
September 18, 2014

1. School Requesting: CLAY COUNTY AC

2. Transportation (Check one): Rental Van
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*: 3:00 pm 4-8-15 - 12:00 pm 4-12-15 Destination*: ACADEMIC TEAM STATE TOURNAMENT WALT DISNEY WORLD
*For school buses . . . if more than one bus is requested, reference bus request form.

5. Group Taking Trip: CLAY COUNTY ACADEMIC 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: The CLAY COUNTY ACADEMIC TEAM WILL COMPETE AGAINST OTHER TEAMS FROM FLORIDA IN THE COMMISSIONERS ACADEMIC CHALLENGE WHICH IS THE STATE TOURNAMENT.

8. Supporting SSS Benchmark(s): _____

9. Number of Students*: 6 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*: 3:00 pm 4-8-15 Returning Time*: 12:00 pm 4-12-15

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
[Signature]
District Office Approval

