

KILLINGLY PUBLIC SCHOOLS FIELD TRIP REQUEST

REV. 7/08

Trip Number: _____ - _____ - _____ Billing Code: _____
Bldg Use Sequence (e.g. 010-1-001)

SCHOOL: _____ GRADE/CLASS/CLUB: _____ DATE: _____

TEACHER/FIELD TRIP LEADER: _____

DATE OF TRIP: _____ NUMBER OF STUDENTS: _____

NUMBER OF CHAPERONES: _____

DEPARTURE TIME: _____ RETURN TIME: _____

On a school day: 8:30 AM or later unless approved in writing by the Transportation Supervisor

2 PM or earlier unless approved in writing by the Transportation Supervisor

DESTINATION/DIRECTIONS (be specific): _____

Yes____No____ **Transportation availability confirmed with Transportation Supervisor.**

Objectives of Trip (relation to curriculum, etc.): _____

Transportation Desired:

Names of Chaperones:

_____ School Bus _____

_____ Mini Bus _____

_____ Other (specify) _____

_____ Van _____

Special Equipment Required:

Substitutes Req. _____
(Number)

_____ Car Seats _____
(Number)

Aide(s) Required _____
(Number)

_____ Handicap Equipped

Nurse Required _____
(Number)

Specify: _____

NOTE: Requests to be submitted with all entries complete at least two weeks prior to the trip. Approval will be given only for trips where careful and early planning insures that worthwhile educational outcomes will result. PLEASE NOTE: Head teacher (school) is responsible for any parking fees.

Teacher

Principal/Program Administrator

Superintendent's Office

Transportation Supervisor

Guidelines for Field Trip Planning and Preparation:

1. There should be one Killingly Public Schools chaperone for every five grade K-5 students, for every ten grade 6-8 students, and for every fifteen grade 9-12 students. If teachers are not available, requests should be made of parents for additional help. (KBOE Policy #6153(a))
2. Order should be maintained at all times with chaperones responsible for the actions of the students under their direction.
3. Attendance should be taken prior to leaving school and after all stops where students leave the bus.
4. A list of students who will be on the field trip must be provided to the SCHOOL OFFICE, and at the high school, to the GUIDANCE OFFICE and ALL TEACHERS. This list must be provided at least one week before the trip.
5. Teachers must secure a written permission slip from the parents of the students making the field trip. Permission slips are available in the school office. Before each field trip departs, a copy of all permission slips should be provided to the school office; original stays with the field trip leader.
6. Any serious violations or breaches of good conduct are to be reported to the school administration as soon as possible. If the situation warrants, the trip director should call the administration from the scene of the violation.
7. Out-of-State field trips must receive approval from the Office of the Superintendent prior to the trip. In-State or out-of-State overnight field trips need to be approved by the Board of Education.
8. For trips to other than one location, the trip director must review routes, destinations, toll arrangements, and all stops with the Supervisor of Transportation prior to the trip.

FIELD TRIP CODES				
<u>SCHOOL</u>	<u>TRIP NUMBER BUILDING CODE</u>	<u>USE CODE</u>	<u>PAYROLL ACCOUNT NUMBER</u>	
KHS	010	0	1-001-80-2710-0125	Use Codes: 0= General Field Trip 1= Sport Trips 2= Band Trips
	010	1	1-001-80-2711-0125	
	010	2	1-001-80-2712-0125	
VO-AG	015	1	1-001-80-2715-0125	
KIS	020	0	1-001-80-2720-0125	
	020	1	1-001-80-2721-0125	
	020	2	1-001-80-2722-0125	
KMS	025	0	1-001-80-2725-0125	
KCS	030	0	1-001-80-2730-0125	
GECC	035	0	1-001-80-2735-0125	
PPS	040	0	1-001-80-2740-0125	
Other _____	050	0	1-001-80-2750-0125	
St. James	099	0	1-001-80-2799-0125	

For Transportation Department Use

NOTE: THIS SECTION MUST BE SUBMITTED PRIOR TO TRIP

Bus Ordered _____
Date

By _____
Supervisor

Estimated Time _____ Total Hours _____

Estimated Mileage _____

Estimated Labor _____ Hours @ _____ = _____

Use of Vehicles _____ Miles @ _____ = _____

Tolls _____

Total Cost _____