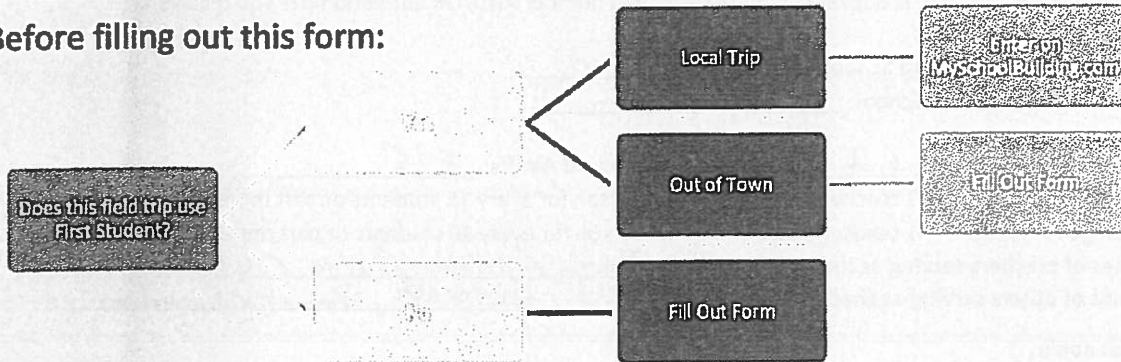




## HAMDEN BOARD OF EDUCATION SCHOOL-SPONSORED FIELD TRIP REQUEST FORM

Before filling out this form:



Field trip requests will now require you to submit this form, in order, to the director, principal, nurse, and lastly the Assistant Superintendent BEFORE you can enter the trip in [www.myschoolbuilding.com](http://www.myschoolbuilding.com). You must receive this form back signed before booking the bus. PLEASE BE AWARE OF YOUR TIME FRAME. Trips must still be entered 15 days before the date of trip, for in-state trips. All out-of-state trips must be approved by the board, first through the Curriculum Committee and then the full board at their next meetings (schedule available on [hamden.org](http://hamden.org)). [www.myschoolbuilding.com](http://www.myschoolbuilding.com) is for use with FIRST STUDENT buses ONLY. If transportation other than First Student is required, this form must be completed, approved, and scanned to [Taryn.Donnarummo@hamden.org](mailto:Taryn.Donnarummo@hamden.org) to keep on file at the Board of Education.

Name of Staff Member Requesting Permission: Tim Trama

Date Request Submitted to Principal: 2/2/24

School: Springs Glen Subject: S.S./ELA

1. Educational Objective for Trip: Students will visit and explore landmarks and museums (Statue of Liberty/Ellis Island) to establish a real-world connection to our integrated unit on immigration

2. Type of Trip: Check the appropriate box(s)  
 Field Trip: In-State  Field Trip: Out-of-State  Trips/Exchanges  Overnight  Extracurricular  International

3. Trip Information:

a) Trip Name: New York City-Immigration Field Trip

b) Trip Date: 5/29/24 (tentatively)

c) Trip Destination: Battery Park New York City New York  
Address City State

d) Organization: (Classroom Grade) Grade 4

e) Transportation Type:  Regular School Bus  Wheelchair Bus  Coach Bus  Walking

f) Name of Carrier:  First Student  
 Other: Metro-North RR/NY Transit (Subway) Do Not enter onto Website

Continue on back for signatures →

g) Cost of Transportation: TBD Source of Funds:

Class Fundraising

\*Account number trip is being paid from (Department) Spring Glen PTA- Grade 6  
First Student trips requiring payment must be paid for in advance. Send check to First Student Inc, 22157  
Network Place, Chicago, IL 60673-1221 with the trip ID number AND/OR quote number you received.

h) Departure/Arrival Time:

- Time Depart from School: 8 7:20 am
- Time Return to School: 10:30 pm

i) Number of Students: 62 Number of Adults: ≈ 15

Field Trip 1 teacher plus 1 additional person for every 15 students or part thereof

Exchange Programs 1 teacher plus 1 additional person for every 10 students or part thereof

j) Names of teachers serving as chaperones: Tim Trama, Adriane Quinn, Chelsea Prince  
Names of others serving as chaperones: HOWEN HUNNATH, Parent chaperones

4. Fill all that apply

- a) Total Cost per Student: TBD What does this cost include? Bus/Train/subway/ferry tickets  
b) Emergency Contact Name: Tim Trama Cell Phone: 860 377-7494  
c) Special Medical Requirements: Based on individual student needs

#### SIGNATURES:

Director: \_\_\_\_\_ Date: \_\_\_\_\_

\* Is this trip connected to the curriculum?  Yes  No

Principal: Howen Hunnath Date: 2-4-24

Nurse: Jessica Lidhar Date: 2-7-24

Assistant Superintendent: [Signature] Date: 2-7-24