

Rec'd 11/21/16

CULVER COMMUNITY SCHOOL CORP

REQUEST FOR FIELD TRIP

SCHOOL(S) CMHS SPONSOR(S) Leeper DATE 11/17/16

GRADE LEVEL/ CLUB/ GROUP ATTENDING FFA

DAY/ DATE OF TRIP 12/3/16 - Sat LEAVE TIME N/A RETURN TIME N/A

PLACE OF PICK UP (be specific) Students are responsible for own ride

DESTINATION (be specific) down + back.

LOCATION OF BUS PARKING AT DESTINATION _____

LUNCH PLANS _____

TYPE OF TRANSPORTATION _____ HANICAPPED BUS NEEDED? _____

NUMBER OF STUDENTS GOING 10 STAFF 1 CHAPERONES 0

NAMES OF TEACHERS / STAFF GOING ON TRIP Leeper

SUBSTITUTE NEEDED FOR WHOM? N/A

IS TRIP CURRICULAR? Yes BRIEFLY STATE DETAILS JUSTIFYING TRIP _____

Livestock judging at Hoosier beef Congress

HOW DO YOU PROPOSE TO DEFRAY EXPENSES OF TRIP? _____

Bus Info : Round Trip Mileage _____ x \$.30 = \$ _____ x # of buses _____ = \$ N/A

Bus Driver Info: Regular Hours _____ x \$4.50 = \$ _____ x # of drivers _____ = \$ _____

Total Transportation Cost \$ _____ ÷ # of Students _____ = Individual Student Cost \$ _____

Ind. Trans. Cost \$ _____ + Admission Fee _____ = Total Student Cost \$ _____

PRINCIPAL'S RECOMMENDATION TO SUPERINTENDENT:

APPROVED
 NOT APPROVED
Principal's Signature _____

SUPERINTENDENT'S ACTION:

APPROVED
 NOT APPROVED
Superintendent's Signature _____

BUS DRIVER ASSIGNED TO TRIP _____

SPONSOR: Please contact transportation supervisor's office (842-3464), at least 2 days ahead of the trip to confirm driver, exact times of departure / return, change in number of participants, or other pertinent information..
PLEASE NOTIFY TRANSPORTATION DEPT. AT ONCE IF TRIP IS CANCELLED.

11-21-16
Bridget
will be approved
12-5-16

Rec'd 11-30-16

Supts
PW CC

CULVER COMMUNITY SCHOOL CORP

REQUEST FOR FIELD TRIP

SCHOOL(S) CES SPONSOR(S) 6th Grade Teachers DATE 11/29/16

GRADE LEVEL/ CLUB/ GROUP ATTENDING 6th Grade

DAY/DATE OF TRIP Mon, Dec 12 LEAVE TIME 9:45 RETURN TIME 10:45

PLACE OF PICK UP (be specific) N/A

DESTINATION (be specific) Culver Miller's Merry Manor

LOCATION OF BUS PARKING AT DESTINATION N/A

LUNCH PLANS N/A

TYPE OF TRANSPORTATION Walking HANICAPPED BUS NEEDED? N/A

NUMBER OF STUDENTS GOING 72 STAFF 3 CHAPERONES 0

NAMES OF TEACHERS / STAFF GOING ON TRIP Todd Shafer, Jean Ahlenius, Pam Craft,

SUBSTITUTE NEEDED FOR WHOM? N/A Stephanie Smith

IS TRIP CURRICULAR? No BRIEFLY STATE DETAILS JUSTIFYING TRIP We are celebrating our 12 Days of Random Acts of Kindness. This is one of our 12

HOW DO YOU PROPOSE TO DEFRAY EXPENSES OF TRIP? _____

Bus Info : Round Trip Mileage _____ x \$.30 = \$ _____ x # of buses _____ = \$ _____

Bus Driver Info: Regular Hours _____ x \$4.50 = \$ _____ x # of drivers _____ = \$ _____

Total Transportation Cost \$ _____ ÷ # of Students _____ = Individual Student Cost \$ _____

Ind. Trans. Cost \$ _____ + Admission Fee _____ = Total Student Cost \$ _____

PRINCIPAL'S RECOMMENDATION TO SUPERINTENDENT:

APPROVED
 NOT APPROVED
[Signature]
Principal's Signature

SUPERINTENDENT'S ACTION:

APPROVED
 NOT APPROVED
[Signature]
Superintendent's Signature

BUS DRIVER ASSIGNED TO TRIP _____

SPONSOR: Please contact transportation supervisor's office (842-3464), at least 2 days ahead of the trip to confirm driver, exact times of departure / return, change in number of participants, or other pertinent information..
PLEASE NOTIFY TRANSPORTATION DEPT. AT ONCE IF TRIP IS CANCELLED.

Supts

Rec'd 11-30-16

CULVER COMMUNITY SCHOOL CORP

REQUEST FOR FIELD TRIP

SCHOOL(S) CES SPONSOR(S) Kindergarten + Specials First grade + Teachers DATE 11-30-16

GRADE LEVEL/ CLUB/ GROUP ATTENDING Kindergarten + 1st Grade

DAY/DATE OF TRIP Wed Dec 14th LEAVE TIME 12:15 pm RETURN TIME 1:15 pm

PLACE OF PICK UP (be specific) We are walking.

DESTINATION (be specific) Culver Miller's Merry Manor

LOCATION OF BUS PARKING AT DESTINATION No bus needed!

LUNCH PLANS N/A

TYPE OF TRANSPORTATION Walking HANICAPPED BUS NEEDED? No

NUMBER OF STUDENTS GOING 86 STAFF 7 CHAPERONES 0

NAMES OF TEACHERS / STAFF GOING ON TRIP Heather Overmyer Kelly Dickerhoff Amy Bonine April Jefferies Andrea Berndt Stephanie Smith Gayle Kinzie

SUBSTITUTE NEEDED FOR WHOM? N/A

IS TRIP CURRICULAR? No BRIEFLY STATE DETAILS JUSTIFYING TRIP To spread Christmas Cheer!

HOW DO YOU PROPOSE TO DEFRAY EXPENSES OF TRIP? No Expenses

We are walking
Bus Info : Round Trip Mileage _____ x \$.30 = \$ _____ x # of buses _____ = \$ _____

Bus Driver Info: Regular Hours _____ x \$4.50 = \$ _____ x # of drivers _____ = \$ _____

Total Transportation Cost \$ _____ ÷ # of Students _____ = Individual Student Cost \$ _____

Ind. Trans. Cost \$ _____ + Admission Fee _____ = Total Student Cost \$ _____

PRINCIPAL'S RECOMMENDATION TO SUPERINTENDENT:

APPROVED
NOT APPROVED
[Signature]
Principal's Signature

SUPERINTENDENT'S ACTION:

APPROVED
NOT APPROVED
[Signature]
Superintendent's Signature

BUS DRIVER ASSIGNED TO TRIP _____

SPONSOR: Please contact transportation supervisor's office (842-3464), at least 2 days ahead of the trip to confirm driver, exact times of departure / return, change in number of participants, or other pertinent information.. PLEASE NOTIFY TRANSPORTATION DEPT. AT ONCE IF TRIP IS CANCELLED.