

DAVENPORT SCHOOL DISTRICT #207

DSD Policy 2320

SPECIAL FIELD TRIP REQUEST FORM

Requests should be submitted to, and approved by, the building principal and the superintendent prior to the distribution of the next board meeting information packet. State laws and District policy require that overnight and/or out-of-state Special Field Trips be approved by the board of directors prior to departure.

<p><b>CHECK ALL THAT APPLY</b></p> <p><input checked="" type="checkbox"/> Overnight</p> <p><input type="checkbox"/> WIAA – sanctioned overnight event</p> <p><input type="checkbox"/> Out-of-State</p>	<p><b>COMPLETE ALL</b></p> <p>Date Submitted _____</p> <p># of school days affected <u>3</u> (include partial days)</p> <p># of substitutes required: full day <u>3</u> ½ day _____</p>
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**TRIP INFORMATION**

Requesting staff member Natalee Hayes Title (circle one: instructor, advisor, coach, AD) Other \_\_\_\_\_

Class, Group or Team FBLA # of students participating 19 Grade Levels 9-12

Destination Spokane WA Miles Roundtrip \_\_\_\_\_

Departure Date 4/20/22 Time 10:30 AM Return Date 4/23/22 Estimated Time 1pm

Education Objectives or related instructional activity of the trip \_\_\_\_\_

Chaperones # of adults (over 21): Teachers: 1 Other Staff Members 1 Parents 1 Other \_\_\_\_\_

Chaperone-to-student ratios must NOT be less than specified in the DSD procedure 2320P.

Transportation Request: School Bus (#)  SUV or Van  Equipment trailer: Y \_\_\_\_\_ N

Other (specify) \_\_\_\_\_

Accommodations: Name of Hotel/Facility: Davenport Grand Phone # 509-458-3330

Attachments: The following information must be attached to this application or detailed on the back of this form:

1) Detailed itinerary including meal plans, schedules, curfew times. 2) Names of Chaperones

**FINANCIAL PLAN**

Expenses	1) District	2) ASB	3) Donation/Student Contribution	Totals of 1,2,3 =
Registration		$\$50 \times 19 = 950$	$\$185 \times 19$	
Housing				
Meals		$\$15 \times 19 = 285$		1)
Substitutes				2)
Transportation				3)
Other		Fundraising $\$2500$		
<b>TOTAL:</b>	Total:	Total: <u>6235.00</u>	Total: <u>3600.00</u>	<b>TOTAL: 9,750</b>
TOTAL EXPENSES should equal TOTAL of 1,2,3				
Name of ASB Account <u>FBLA</u>		Total \$\$ in ASB Account _____		

I have read and agreed to abide by policy 2320 and procedure 2320P. I have confirmed that all chaperones have been briefed per the DSD Policy 2320 Procedure and have signed the District's Chaperone Agreement.

Signature of Staff Member Requesting Trip Natalee Hayes Date 3/14/2022

**Office Use:** Cost/Mile is \$ \_\_\_\_\_ for each bus \$ \_\_\_\_\_ for SUV or Van \$ \_\_\_\_\_ for the equipment trailer

Budget Code(s) \_\_\_\_\_

**I have reviewed the trip plan and recommend its approval by the Board of Directors**

Principal Cheryl Prueff Date 3-23-22

Superintendent [Signature] Date 3-23-22 Schedule for Board meeting date 3/28/22

Board approved (chairman's signature) \_\_\_\_\_ Date \_\_\_\_\_

DATE	TIME	DETAILED TRIP ITINERARY
April 20 <sup>th</sup>	10 AM - 10 pm	<ul style="list-style-type: none"> <li>- Travel to hotel</li> <li>- Practice Presentations</li> <li>- Awards Ceremony / opening</li> </ul>
April 21 <sup>st</sup>	8 AM - 8 pm	<ul style="list-style-type: none"> <li>- Presentation performances</li> <li>- Workshops + Networking</li> </ul>
April 22 <sup>nd</sup>	8 AM - 8 PM	<ul style="list-style-type: none"> <li>- Presentation performances</li> <li>- Workshops + Networking</li> <li>- Chapter Dinner</li> </ul>
April 23 <sup>rd</sup>	8 AM - 12 pm	<ul style="list-style-type: none"> <li>- Awards of Excellence</li> <li>- Leave / check out</li> </ul>

LIST OF CHAPERONES:

Stephanie Thorsen

Farah Slahtasky

Ryan Slahtasky

OTHER INFORMATION: