Field Trip Authorization Form

Used for any field trip that will require **students to travel over 100 miles one way** and/or remain **away from home overnight** must be submitted to the Superintendent for approval prior to arrangements being made by the staff member involved. (Per Policy IICA)

Teacher/Advisor Name: Samantha Manloomyschool: SHS		
Class or Activity: KeyClub		
Purpose of Trip: District Educational Conference		
Attach additional supporting documentation: Ex Programs, Student Lists, Accommodations Grade Level(s): 9-12 No. of Students on trip: 30		
Date(s) of Trip: 3 31 - 42 23		
Destination(s): Springfield MA Shevator		
Method of Transportation: School Bus		
Number of Chaperones including teacher/advisor:		
Will students be away from home overnight? Yes No		
If Yes, explain accommodations: 4 Students of Save		
gender per room Funding Source: Students / Kiwans		
Has this field trip occurred in previous years? Yes No		
Aci 7		
Signature of Teacher/Advisor Date of Submission		
Approval and Signature of Building Administrator Date of Approval		
FEB COHOOLDEP		
Approval and Signature of Building Administrator Date of Approval Submit to Superintendent two weeks prior to requested trip date Muth Muson Z/9/Z3		
Approval and Signature of Superintendent Date of Approval		
School Committee Notified Date: Notified Teacher/Advisor: Notified Teacher/Adv		

FIELD TRIP AUTHORIZATION FORM

FORM 1A

Used for any field trip that will require student to travel over 100 miles one way and/or remain away from home overnight. Must be submitted to the Superintendent for approval prior to arrangements being made by the staff member involved. (Per Policy IICA)

Teacher/Advisor Name: Ms Auth L. Lange	School: SRTC
Class or Activity: Digital Design	*:
Purpose of Trip: Coluge visit / career	awareness
Attach additional supporting documentation	on: Ex. – Programs, Student Lists, Accommodations
Grade Level(s): Junion + Seniors No	o. of Students on Trip: 27 +or -
Date(s) of Trip: March 154	
Destination(s): NEIT (New England.	Jastitute of Technology)
Method of Transportation: Coach limesine	
Number of Chaperones (including teacher/advisor):	3
Will students be away from home overnight? YES	NO'
If yes, explain accommodations: FYT: 5	students used to arrange
pick up transportation upon	PETERS to SRTC @ aprox
4:30 - 5:00 pm march 1	St 2023.
Funding Source: Mel MAC Great / Digit	tel Design Activity Account
Has this field trip occurred in previous years? (YES) N	10
Mrs. anita J. Larges	1-18-2023
Signature of Teacher/Advisor	Date of Submission
Mill This	2-3-2023
Approval and Signature of Building Administrator	Date of Approval
Submit to Superintendent two	weeks prior to requested trip date
Mutt Nelsus	2/9/23
Approval and Signature of Superintendent	Date of Approval
School Committee Notified Date:	Notified Teacher/Advisor: Date:
Updated 09/2022 SRTC	Date of Approval Notified Teacher/Advisor: Date: RECENTED School Department

FIELD TRIP REQUEST FORM

FORM 1

DIRECTIONS: To be completed by the instructor and submitted at least two weeks prior to the planned activity

TRACUED MA MA MA A	A. (A A
TEACHER: MS. Anita LANGON PROGR	
LOCATION OF THE FIELD TRIP: NEIT (ANG. EN	
DATE OF THE FIELD TRIP: MARCH DEPAR	TURE TIME: 8:15 RETURN: 9:30-5:0
TYPE OF TRANSPORTATION: (CIRCLE ONE) WALK O	AR BUS OTHER
TOTAL# OF STUDENTS: 27 TRANSPO	PRINTED COST PER STUDENT:
OTHER STUDENT FEES:O TOTAL CO	OST PER STUDENT:
WHAT PROVISIONS HAVE BEEN MADE TO ASSIST STUDEN	IS WHO ARE UNABLE TO AFFORD THE COSTS?:
Digital Design ACTIVITY ACCOUNT	/ MELMIL FUNDS
ADDITIONAL TEACHER COMMENTS: Students she	ald bring succks + howage for
bus ride (Aprix 3hrs.) Students stone	le take AM SRIC BUS TO SRIC:
# OF CHAPERONES: 3 TEACHERS: 2 VO	of Barents will week to put up
# OF CHAPERONES: 3 TEACHERS: 2 VC	DLUNTEERS: _ at and og day.
Please note that you are required to have 1 chape	erone for every 15 students attending
	soe otherside
CURSTITUTE OR ISEA OF MISTERS (CIRCLE OME)	s (NO) P See otherside
SUBSTITUTE COVERAGE NEEDED: (CIRCLE ONE)	
EDUCATIONAL RELEVANCE OF THE TRIP TO THE CURRICULU	
College located in East Greenwich Amountion Graphic Design + Mation Grap Programming games.	RI/which has presones in
Amonation, Graphic Design + Marian Gray	OKES GHUE ART + DODIER
ARE THERE ANY STUDENTS WHO WILL NOT BE ATTENDING	THIS EIELD TRID FOR ANY DEASONS YES NO. ?
WHAT PLANS HAVE BEEN MADE FOR THESE STUDENTS?	
Signature of Sponsor(s):	Date:
Signature of Director:	Date:
27	

Any students whom do not attend will De plucea into MR. Harmond's video production as a job shadow.

FIELD TRIP AUTHORIZATION FORM

SRTC

FORM 1A

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Teacher/Advisor Name: Josph Bolduc	School: SRTC
Class or Activity: SKIlls USA SKIlls + Leaders	ship Conference - Bangor
Purpose of Trip: State Skills & Leaders	ship Conference
Attach additional supporting documentation:	Ex. – Programs, Student Lists, Accommodations
Grade Level(s): 11 12 No. c	of Students on Trip: 45 - 50
Date(s) of Trip: manch 16 - Retur	n March 17
Destination(s): Bangor Main Fairfie	Idian, Cross ins one ote EMCC
Method of Transportation: C+ J coach	
Number of Chaperones (including teacher/advisor):	
Will students be away from home overnight? YES NO	
If yes, explain accommodations: FAITE	eldinn Bangar
* Note - Hotel information, addless	phone etc. has been Submitted me
* Note - Itenerary of events -t,	ines has been Submitted. 9M
Funding Source: 5K, 11505A Accts.	- SKILL USA Funds me
Has this field trip occurred in previous years? YES NO	
Gosph & Bull	2123
Signature of Teacher/Advisor	Date of Submission
Mul and	2-13-22
Approval and Signature of Building Administrator	Date of Approval
	weeks prior to requested trip date
1	13 2023
Mutt Men	2-13-22 FEB 10-
Approval and Signature of Superintendent	Date of Approval SANFORDSCHOOLDEP
School Committee Notified Date:	Notified Teacher/Advisor: Date:
Updated 09/2022	

FIELD TRIP AUTHORIZATION FORM

Updated 09/2022

SRTC

FORM 1A

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Teacher/Advisor Name:	School: SRTC	
Class or Activity: Building Trades		
Purpose of Trip: Industry trade sho	w with training som in AB	
	Ex. – Programs, Student Lists, Accommodations	
Grade Level(s): 11-12 No. 0	of Students on Trip:	
Date(s) of Trip: 3-24-23		
Destination(s): Pavideur Convention	Centre Providence Rt	
Method of Transportation:		
Number of Chaperones (including teacher/advisor):	3	
Will students be away from home overnight? YES NO		
If yes, explain accommodations:		
AND DESIGNATION OF DESIGNATION OF THE PROPERTY		
Funding Source: <u>A ELMAC</u>		
Has this field trip occurred in previous years? YES NO		
SALA.	2-3-23	
Signature of Teacher/Advisor	Date of Submission	
Mul glad	2-5-2023	
Approval and Signature of Building Administrator	Date of Approval	
Submit to Superintendent two weeks prior to requested trip date		
Mutt Nehr	Date of Approval veeks prior to requested trip date 7-13-77 SANFORDSON: 111	
Approval and Signature of Superintendent	Date of Approval	
School Committee Notified Date:	Notified Teacher/Advisor: Date:	