

THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA
1960 LANDINGS BLVD., SARASOTA, FL 34231
PHONE (941) 927-9000

FIELD TRIP AUTHORIZATION

Instructions: In-county field trips/school bus requisitions require principal approval only. All other field trips/school bus requisitions require principal and executive director approval. In addition, any trip involving students' out-of-state/country travel also requires School Board approval and should include release forms, insurance coverage, and other data supplied by the company assisting with the arrangements. Provide the information requested below and submit this completed form with appropriate attachments for approval adhering to the advance notification time prior to departure date noted after field trip below. Refer to School Board Policy 4.43.

Check One ☐ In-county ☐ Out-of-county (4 wks) ☒ Out-of-state (8 wks) ☐ Out-of-country (12 wks)

School Suncoast Technical College Destination SWIC

Purpose CNC Machining Competition

Departing from STC Date 4/11/2022 Time 8:30a AM/PM

Returning from SWIC Date 4/13/2022 Time 8:00p AM/PM

Grade/Class/Sport Precision Machining? CNC Production Specialist

Person-in-charge Ed Doherty Phone 941-525-3074

Method of transportation ☐ School bus (Attach School Bus Trip Requisition) ☐ Charter bus
☒ Airline ☐ Other (Explain) _____

NOTE If other than a Sarasota County school bus is being used, attach certificate of insurance from carrier or Statement of Insurance on Private Vehicles form (065-96-FIN). See School Board Policy 8.36.

Meal arrangements Project MFG Sponsor

Lodging arrangements Project MFG Sponsor

Number of female students 0 Number of male students 4 Total 4

Number of female chaperones _____ Number of male chaperones 1 Total 1

Names of chaperones 1

Cost per student \$ 0

It is understood that permission slips and Emergency Medical/Treatment Field Trip Consent forms will be obtained from parents prior to the field trip.

Funding Source ☐ Individual ☐ Fundraiser ☐ PTO/PTA ☐ Internal funds
☒ Other (Explain) Project MFG

Verification of student medical insurance was completed for out-of-county/overnight travel? ☐ Yes ☐ No

Principal Name Ron Doherty ☒ Approved ☐ Denied

Principal Signature [Signature] Date 3/29/22

Executive Director Name _____ ☐ Approved ☐ Denied

Executive Director Signature _____ Date _____

Out-of-state/country field trip was School Board approved on (Board meeting date) _____

FIELD TRIP AUTHORIZATION

Instructions: Provide the following information for all field trips.

1. Explain the direct instructional connection with instructional program.

CNC Machining competition

2. Describe how students are being selected to participate with assurances of equal access for all students, regardless of economic level.

All students participate in class before competition

3. Describe how students will be supervised once they arrive.

By instructor Ed Doherty

4. Should an emergency arise, how will communication and transportation be handled?

By Instructor Ed Doherty

THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA
1960 LANDINGS BLVD., SARASOTA, FL 34231
PHONE (941) 927-9000

FIELD TRIP PERMISSION

Instructions: Complete and return this form to the school. It must be returned to the school before student will be allowed to participate in this activity. The Emergency Medical/Treatment Field Trip Consent form must also be on file at the school before your student will be allowed to participate in this activity. A copy of that form shall accompany this sheet with the classroom teacher/coach or interscholastic activity sponsor. A detailed itinerary is attached if the field trip extends beyond the school day.

School Suncoast Technical College Date 4/11/2022

Principal Name (Print) _____ Principal Signature [Signature]

FIELD TRIP INFORMATION

Purpose CNC Machining Competition

Destination SWIC - Southwest Illinois College

Time/Date of departure 8:00a 4/11/22

Time/Date of return 8:00 p 4/13/22

Leaving from STC

Returning to STC

Means of transportation adult carpool - airport

Meal arrangements Project MFG Sponsor

Cost to students none

FIELD TRIP PERMISSION

I, _____, give my permission
Parent/Guardian Name (Print)

for _____, to participate in the field trip
Student Name (Print) DOB

to _____ (destination) on _____ (date).

The phone number where I can be reached during this field trip is _____.

I realize that any activity that takes place away from the controlled environment of the school setting may present a higher risk of injury to my child. I also understand that this activity may be cancelled due to changing state, national, or international conditions. I assume responsibility for any personal financial loss related to such a cancellation. In consideration for permitting my child to participate in this field trip, I release the School Board of Sarasota County, Florida, its employees, and agents from all claims, judgments, costs, or other expenses, including attorneys' fees, resulting in any way from participation in the field trip described above.

Parent/Guardian Signature _____ Date 4/13/2022