Bucyrus City School District

PROPOSAL FOR OVERNIGHT/EXTENDED STUDENT TRIPS

Type of T	Trip \	Jarsity Volleyball Team Camp
		ure Date
		ober Christy Position Head Coach
		sponse is needed ASAP Proposal Date 3-3-33
Α.	Purpo	
	1.	What is the major place to be visited or event to be attended? Friendship cup - masan, OH Sports express volley ball Center
	2.	How is the trip related to the educational program of the District? Sport - Volleyball
	3.	In what ways will the students benefit? Team play / Team banding
	4.	In what ways will the District benefit? BHS Volleyball Pragram
	5.	How will the trip be evaluated to determine the extent to which these benefits were realized?

B.	Students	and	Ctoff
D.	Students	anu	Stall

1. Which students, (grade, class, or organization), will be going?

Varsity level - Gr 9-12

2. How many students in total?

10

3. How many students are currently experiencing academic problems?

nla

4. Which staff member will be in charge?

Amber Christy - Head Coash

5. What previous experience has the staff member had in conducting overnight or extended field trips?

23 yrs - Summer volley ball trips

6. What other staff members will be going?

UV/Varsity assistant

7. How many chaperones, in addition to staff members, will be going?

1-2

8. What are their names and affiliations with the students?

* Tonya Kimmel Renee Tyrrell

9. How many school days will be missed?

7/0

10. How will teachers be advised in advance that the students will be out of school?

NIa

/٧	OI.	Κ
	N	∕ Vor

How will missed work be made up?

nla

2. What special assistance will be provided students with academic problems?

nla

D. <u>Itinerary</u>

1. What is the destination?

Mason, Oh

2. What will be the mode of transportation? What liability insurance does the carrier have?

BuS

3. Where will the group be housed and fed?

Drury Inn + Suites 9956 Escort Dr

4. What enroute or supplementary activities are planned?

Kings Island

5. What arrangements have been made for dealing with emergency situations?

final forms emergency into.
Parent Contacts

6. What arrangements have been made for administering necessary medications to students while on this trip?

Parent Contacts - (1/q)

7. If tour guides are involved, what liability insurance do they carry?

7/9

E. **Finances**

- 1. What is the estimated total cost and cost per student? #32200
- What is the source of funds?

@ Fundraiser

@ Parent (3) VB-Booster account

How will the funds be collected and safeguarded? 3.

By Booster acct - Collected by head coas!

4. How will any shortfall be made up or excess funds used?

Fundraiser

What provision has been made for students who are financially unable to pay any 5. necessary costs?

Booster Occat.

Date

F.	Commu	<u>inications</u>	
	1.	How will you communicate to parents prior to, during, and a	after the trip?
	2.	List telephone numbers at destination and where group will $Drury Inv + Suites$	
	3.	What information will be provided to the media and the con	
Signature	of the Re	equestor	3-3-23 Date
Approved:	2		3 8 23 Date
2			Date

Board of Education