

**MONTGOMERY COUNTY SCHOOLS  
SCHOOL TRIP REQUEST**

**ALL OVERNIGHT FIELD TRIPS MUST BE APPROVED BY THE BOARD PRIOR TO THE DEPARTURE DATE**

TRIP TYPE: Day\_\_\_ Overnight\_ X\_\_\_ In County\_\_\_ Out of County\_ X\_\_\_

SCHOOL: WMHS and EMHS TEACHER: McCall DATE: 25-27 Sep 2014

ACTIVITY: Aquarium/Fort Macon/Seymour Johnson AFB Trip

DESTINATION: Goldsboro nc

Grade/Class/ClubSponsor: AFJROTC

Teacher(s): Number: 4 Names: Croucher,Wiles,McCall,Dickens  
Mrs Croucher

Chaperones: Number: 1 Names: \_\_\_\_\_

Students: Number: 40 East, 40 West \_\_\_ All students given opportunity? Y\_\_\_ Y\_\_\_ N\_\_\_

COSTS: Per Student \$ 0 Fund raiser activities? Y\_\_\_ N\_\_\_ X\_\_\_  
If yes, explain \_\_\_\_\_

PARENTAL PERMISSION OBTAINED? Y\_\_\_ X\_\_\_ N\_\_\_

PURPOSE/OBJECTIVE OF TRIP: Provide History, Technology, and Zoology Education.

DATES: Trip date (s) 25-27 Sep 2014 (Alt date of 23-25 Oct 2014) Number of school days 1

Departure time: 3:30 pm Location WMHS

Arrival time: 6:30 pm Location Seymour Johnson AFB

Return time: 6:30 pm Location WMHS

TRANSPORTATION: School Bus/Number \_\_\_\_\_ Activity Bus/School X

Charter Bus Company: Royal Tours \_\_\_\_\_ Phone \_\_\_\_\_

Holiday Tours \_\_\_\_\_ Phone \_\_\_\_\_

Carolina American \_\_\_\_\_ Phone \_\_\_\_\_

ROUTE TO BE FOLLOWED: hwy 109, hwy 24/27, Hwy 95, Hwy 70

ADDITIONAL STOPS: None

ACCOMODATIONS: Hotel/Other \_\_\_\_\_ Phone \_\_\_\_\_

APPROVAL: PRINCIPAL  DATE 9/8/14

SUPERINTENDENT or DESIGNEE \_\_\_\_\_ DATE \_\_\_\_\_

ANYONE NOT EMPLOYED BY MONTGOMERY COUNTY SCHOOLS MUST COMPLETE A BACKGROUND CHECK PRIOR TO ACTING AS A CHAPERONE ON AN OVERNIGHT TRIP.

ALLOW 10-14 DAYS FOR THE RESULTS OF THE BACKGROUND CHECK ONCE IT IS SUBMITTED

Revised 10/10