Calendar Request - Field Trip

Spartanburg Christian Academy

Instructions: *Complete **ALL** information and route to Principal for approval process at least 3 weeks before events or before lunch menus are sent home for the month when lunch in involved. Keep a copy of request and maps sent. A confirmation will be returned by email when approved. If Sub needed to cover classes, please submit request to Principal using Employee Time-Off Form.*

Today's Date:_____

Date of Trip (Weekday & Date):_____Time of Departure:_____ Return:_____

Grade/Class:_____ ___ Contact Person:_____

Destination-include all locations:_____

Academic Objectives:_____

Bus Information

Buses 1 and 4 each hold 46 passengers. Bus 2 (older bus) holds up to 57 (3 per seat) for Grades 3K-4th. Bus 2 is only used for short trips within Spartanburg. Bus 3 (mini-bus) holds 14 passengers.

No. of Teachers_____+ No. of Students_____ = ***Total No. Riding Bus*_____**   *If total is over 46, can you use Bus 2?* ☐ *Yes*   ☐ *No*

FOR OFFICE USE ONLY: Drivers____ x hours_____ = Total hours_____

Mileage

*Attach directions including **all** locations from and back to SCA, printed from www.google.com/maps. **Round Trip Total Miles:**_____*

Admission Cost

Is SCA responsible for covering admission costs?

☐ No: _____(✓) student will bring $_____ for admission

_____(✓) no cost for admission

☐ Yes:

# of students _____ x cost per student $_____ = Total Cost $_____

# of teachers _____ x cost per teacher $_____ = Total Cost $_____

# of bus drivers _____x cost per driver $_____ = Total Cost $_____

Total Admission Cost: $_____

_____Cash needed for day of trip

_____Check Requested: ☐ Mail prepayment   ☐ Need day of trip

Made payable to:_____

Address:_____

Phone:_____

Meal Cost   *(always ask about complimentary driver meal)*
Is SCA responsible for covering meal costs?

☐ No: _____(✓) student will bring lunch, or cost of _____ for meal

_____(✓) no cost for meal

☐ Yes: Location:_____

# of students _____ x cost per student $_____ = Total Cost $_____

# of teachers _____ x cost per teacher $_____ = Total Cost $_____

# of bus drivers _____x cost per driver $_____ = Total Cost $_____

Total Meal Cost: $_____

_____Cash needed for day of trip

_____Check Requested: ☐ Mail prepayment   ☐ Need day of trip

Made payable to:_____

Address:_____

Phone:_____

Notes:_____

_____

_____

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