

Akron Public Schools
OFFICE OF CAREER EDUCATION
BULLETIN 21 : *Educational Field Trips General Guidelines*

PROCEDURES:

1. To obtain field trip approval, email your career education building staff liaison and CTSO liaison for **approval for field trip expenses before** completing the forms; (for example; number of students, date, time, approximate cost.)

BPA	Rich Messenger
DECA	Stacey Rice
FCCLA	Gloria Harms
FFA	Rich Messenger
SKILLS USA	Frank Meyers
Health Occupations	Carol Healy

Initial approval will be sent via return email from the CTSO liaison.

2. Once approved and three weeks prior to the field trip, the following forms must be sent to the Office of Career Education:
 - Educational Field Trip Request Form – Attachment A – (Main Office)
 - Providing exact departure and return times will assist in determining if we use an APS or charter bus.
 - Career Education will make arrangements for all bus transportation for which we are the funding source. Once arrangements are set you will receive written confirmation.
 - Specific pick-up and return time and location will be the CTSO liaison or teacher’s responsibility as long as it does not increase the cost of the trip.
 - Career Education Vans – to use the seven passenger van, the instructor must have their van license renewed annually. Call the office at 330-761-3131 to begin the process of obtaining your licenses or to reserve a van.
 - S2J – Modification of Worksite – Attachment B – (Main Office)
 - Request for Substitute Form – Attachment C – (Main Office)
 - Conference/Field Trip Assessment Sheet – Attachment D – (www.apscareers.com)
 - Sub Back-Up Plan – Attachment E – (www.apscareers.com)
3. Your principal must sign appropriate forms.

The Office of Career Education supports the Field Trip Guidelines as designated in the Akron Public Schools Business Affairs Handbook.

(Refer to: <http://www.akron.k12.oh.us/dept/009/Transportationschedulingfieldtrips.htm>)

Bulletin 21 - Attachment A

76-06-0016

07/02

EDUCATIONAL FIELD TRIP REQUEST FORM

IMPORTANT: PLEASE READ BEFORE COMPLETING REQUEST FORM

- Akron Public School buses may be used weekdays 9:00 AM to 1:30 PM and after 4:00 PM. Buses may be used all day on Saturday.
- To reserve A.P.S. buses, schools must call Transportation Services at (330-761-1391), **BEFORE**, submitting paperwork to Curriculum & Instruction.
- Please use only **one** date per field trip request form.
- All field trip request forms **MUST** include the funding source to be used to pay for the bus.
- Paper work **must be** to Curriculum & Instruction a minimum of (3) **three weeks** prior to the date of the trip. Transportation Services a minimum of (2) **two weeks** prior to the date of the trip.
- Buses **will not** be scheduled if the request form, including funding, are not on file at Transportation.

COMPLETE FOR ALL FIELD TRIPS

School Name: _____ Grade: _____ Date of Trip: _____

Destination: _____

Benchmark/Purpose: _____

Transportation: Yellow bus: _____ Date you called to reserve the bus: _____

Charter _____ er: _____
I have th _____

Time of _____

SIGNA _____

**This Form is Located in the Main
Office of Your School**

Teacher: _____ Date: _____ Principal: _____ Date: _____

Executive Director/Curriculum & Instruction: _____ Date: _____

REQUEST FOR YELLOW BUSES (complete *ONLY* if you are using yellow buses)

(1) TO RESERVE BUS - CALL TRANSPORTATION . (2) SEND COMPLETED FORM TO:
CURRICULUM & INSTRUCTION A MINIMUM THREE OF WEEKS PRIOR TO DATE OF THE FIELD TRIP.

School: _____ No. of buses: _____ No. of passengers: _____ Date of trip: _____

Destination: _____ Location of pick up at school _____

Special Instruction/Directions: _____

Departure time from School: _____ Departure time from trip-site **no later** than 1:30: _____

BILLING INFORMATION (SHORT CODE) or PROGRAM: _____

MUST be included.

NOTE: Schools retain Goldenrod copy; send remaining copies to Division Office. Pink (Division Office); Yellow/White (Transportation).
White copy will be returned to school when bus is scheduled.

AUTHORIZATION FOR BUSES

Curriculum & Instruction: _____ Date: _____

Executive Director

Bulletin 21 - Attachment C

AKRON PUBLIC SCHOOLS Goldenrod Form – Request for Substitutes

SECTION I

To be completed by employee.

Instructions:

- Specify reason for request; provide official name of workshop as shown on flier.
- Form must be submitted **TWO WEEKS IN ADVANCE** and approved by funding director.
- Do not combine elementary and secondary teachers on one form.
- Use a separate form for dates that are not consecutive.
- For absences beginning on a Monday, Wednesday or Thursday, send original form and S2j to B. Burchett, OTT SDC; for absences beginning on a Monday or Friday, send to C. Hathorn, Certificated Staff, Administration Building. Always keep a copy for your records.
- The approved Goldenrod should be attached to the S2j and sent to the Office of Certificated/Licensed Staff, Administration Building, Rm. 216 (The goldenrod and S2j must arrive in the Office of Certificated/Licensed Staff at the same time. If the S2j and the goldenrod arrive separately, they will be sent back to the teacher).

TEACHER NAME(S)	SCHOOL	SUBJ/GR LEVEL	CIRCLE DAYS OF WEEK	DATES FOR SUBSTITUTE	CIRCLE ONE AM, PM OR ALL
			M T W TH F		AM, PM OR ALL
<h2 style="margin: 0;">This Form is Located in the Main Office of Your School</h2>					AM, PM OR ALL
			M T W TH F		AM, PM OR ALL

REASON FOR REQUEST (BE SPECIFIC): _____

SECTION II

This section is to be completed by the Principal and the Funding Source.

FUNDING SOURCE: (Provide long and short codes)

LONG CODE:

Short code: _____

Signature of Principal

Signature of Funding Source Director
(If Principal is Funding Director, please sign here also)

Signature of Executive Officer, Personnel (as needed)

Signature of Staff Development Office or
Certificated/Licensed Staff

**Conference/Field Trip Assessment Sheet Bulletin 19 -
Attachment A / Bulletin 21 - Attachment D**

Please answer the following questions and return with conference forms and checklist:

Describe the rationale for attending this conference or field trip. Include how this is in alignment with your graded course of study, how it aligns with the APS Strategic Plan, how it aligns with your building improvement plan, etc.

Describe how your students will benefit from this experience.

How will information received be disseminated to other staff?

Substitute Back-Up Plan Bulletin 19 - Attachment B / Bulletin 21 - Attachment E

Check the box that applies.

This is the Substitute Back-Up Plan for

Teacher

on .

Date

NOTE: If you are unable to start the day at the building you must complete this section.

Period	Coverage Teacher	Subject/Duty	Room
HR			
1			
2			
3			
4			
5			
6			
7			
8			
9			

If a substitute is not available, I will cancel my field trip or conference and remain in the building.

Teacher

Date

Principal

Date