

**SUFFOLK PUBLIC SCHOOLS**  
(Attach to field trip application requiring School Board approval)

**Field Trip #:** 19947

**School:** King's Fork High School

**Grade/Subject/Club/Team:** Jazz Band

**Date of Field Trip:** February 23-24, 2024


**Destination:** James Madison University, Harrisonburg, Virginia

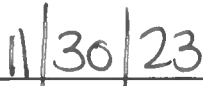
**Purpose:** King's Fork High School Jazz Band will participate in the All Virginia Band Auditions at James Madison University.

**Objectives:** King's Fork High School Jazz Band will have the opportunity to participate in the All Virginia Band Auditions at James Madison University in Harrisonburg, Virginia.

☒ **Approve**

☐ **Disapprove**

  
\_\_\_\_\_  
Director of Secondary Leadership

  
\_\_\_\_\_  
Date

**School Board Action:**

☐ **Approve**

☐ **Disapprove**

\_\_\_\_\_  
Clerk of the Board

\_\_\_\_\_  
Date

## Travel Request Form

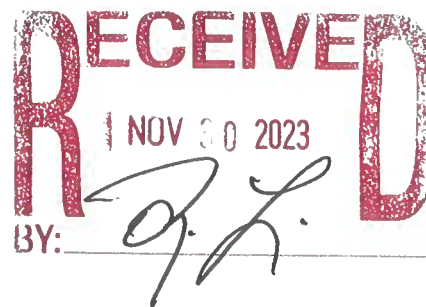
Please Note: Welcome to Suffolk City Public Schools Travel Tracker, your one-stop travel center. Within this software, you can submit student field trip requests, reserve an activity bus for a field trip or athletic event, and reserve a car for staff travel. If you have any questions or comments please email kevinprivott@spsk12.net or call (757) 925-5573.

Trip Number **19947**

\* Category **Travel With Students**

\* Type of Trip **Field Trip**

\* Field Trip Event **Jazz Band**



### Trip Leave

\* Date **2/23/24** **Friday**

\* Time **12:00 PM**

### Trip Return

\* Date **2/24/24** **Saturday**

\* Time **3:00 PM**

Trip Year/Week 2024-08

\* Is this trip overnight, out-of-state, or greater than 200 miles one way? **Yes**

Comments

\* Your School/Dept ⓘ **395 King's Fork High**  
**351 King's Fork Rd, Suffolk, VA 23434**

\* Main Destination ⓘ **Other (Type Below)**  
**800 S Main St, Harrisonburg, VA 22807, USA**

Destination Not Listed **James Madison University, South Main Street, Harrisonburg, VA, USA** \* Destination Name **James Madison University**

\* Approximate Nbr of Miles Round Trip **1414.70**

Special Instructions for Permission Slip

Funding Source #1 **School Allotment - Kings Fork High**

Budget Code

Funding Source Desc

Budget Code Desc

Funding Approver

Are funds payable to a third party? **No**  
(Does venue require payment prior to trip?)

\* Teacher / Advisor / Staff Name **Bernard Bradley**  
\* Teacher / Advisor / Staff Phone # **804-301-6613**  
Teacher / Advisor / Staff Email **bernardbradley@spsk12.net**

Note: This email will receive the requester emails if different from requester

Emergency Contact Info **Same as Teacher / Advisor / Staff**

\* Emergency Contact Name **Bernard Bradley**  
\* Emergency Contact Phone # **804-301-6613**

\* Grade Level(s) Making Trip **9**  
**10**  
**11**

12

- \* Description of group or person(s) making trip King's Fork High School Symphonic Band students in grade 9-12
- \* Educational Objective for Field Trip The student will demonstrate collaboration and communication skill for music.  
The student will demonstrate music literacy  
The student will demonstrate proper instrumental techniques

### Number of Individuals Making Trip

- \* Male Adults 1
- \* Female Adults 0
- \* Male Students 2
- \* Female Students 3
- Total Adults 1
- Total Students 5

Need 1 adult(s) for 15 or more students.  
Need 1 adult(s) for every additional 15 students.

- \* Will the students be away from school during lunch? Yes
- \* If so, will these students need packed lunches? No

Nbr Students 5 Teacher Bernard Bradley  
Students will be away from school during the lunch period.

### Additional Information

- \* School will be billed for Mileage No
- \* School will be billed for Driver No
- \* What is the cost to the Student? Hotel Fee
- \* Description of the funding source you will be using : Joleen Neighbors is funding the bus and driver since this is curricula required. The student's family will be paying for the hotel.
- \* Will a coach be driving the trip? No
- \* If yes, please enter the coaches name. If no, enter NA. N/A
- \* Will you be using external transportation (ex. plane, walking)? No

### Vehicles Needed

- \* Do you need vehicles? Yes

Check here to indicate trip is drop-off only Location

Check here to indicate trip is pickup only Location

#### Vehicle Pickup

- \* Date 2/23/24
- \* Time 12:00 PM

#### Vehicle Return

- \* Date 2/24/24
- \* Time 3:00 PM

Total Trip Hours 27.00

- \* Type of vehicles needed to reserve Yellow Bus  
①
- \* How many vehicles do you need? 1
- Vehicle Guidelines: Elementary 64 and 77 passengers. Secondary 44 to 40
- \* Need Lift? No

Nbr Wheelchair Slots 0 Nbr Safety Vests 0 Nbr Fold Down Seats 0

#### Special Needs

Comments or Details Concerning Needs

Vehicle Driver Information

Owner shanellwilliams@spsk12.net

## Field Trip Acceptance of Responsibility

By submitting this request, the trip sponsor (Teacher, Coach, Staff Member, etc.) is validating the following conditions:

1. Possess a current/valid Driver's License for the vehicle you will be driving
2. Absent of any medical condition, medications/alcohol/drugs that will impede the operation of a vehicle
3. You will obey all traffic laws while operating the vehicle
4. You will not "text" or operate any device that may distract you while driving the vehicle
5. Properly authorized use of a Suffolk City Public Schools vehicle for official travel
6. Will only transport authorized passengers for the purpose of official travel
7. The lift is to be operated only for wheelchairs.
8. Buses and vehicles must come back in good condition in order to avoid additional charges.
9. Buses and vehicles must be cleaned in order to avoid additional charges.
10. Elementary Schools must have 1 adult per every 10 students.

\* I have read and understand the information above.

Yes

## Level 01 Approval - Location Approval

Comment

Decision

Approved

Name

derrickbryant@spsk12.net

Decision Date

Nov 28, 2023, 6:22:53 PM

## Level 02 Approval - Second Level Location Approval

Comment

Decision

Designated Approver

keeshahicks@spsk12.net

Name

Decision Date

## Level 07 Approval - Overnight/OOS Approval

Comment

Decision

Name

Decision Date

**Application for Field Trip**

Submit intact to the Athletic Director, Principal, or Bookkeeper/Secretary, at least 30 working days (6 weeks) prior to the scheduled date of the trip. All professional leave forms for this trip must be submitted with this form. All forms are to be done in blue or black ink only.

School/Organization Kings Fork HS Date 11/15/23  
Grade/Subject/Club Symphonic Band Teachers Bradley

**REQUEST FOR SPECIAL USE OF SCHOOL BOARD VEHICLE**  
(Personal cars are not to be used to transport students)

Date of Field Trip 2/23/24 Time Departing School 12:00<sup>noon</sup> Time Returning to School 2/24/24 3:00<sup>pm</sup>

Destination; James Madison University

School Bus ☒ Number Needed 1

**SPECIAL NEEDS BUS**

Equipment Needed: W/C ☐ PCR ☐ Safety Vest ☐

School Car \_\_\_\_\_ Number Needed \_\_\_\_\_

(School cars are not to be used to transport students)

Number of Students 5 Number of Classes \_\_\_\_\_

Overnight Trip? ☒ Yes \_\_\_\_\_ No \_\_\_\_\_

Total Cost to Student Hotel Fee \*Other Costs Incurred \_\_\_\_\_

\*Paid By Students Family

Names of Chaperones (Not including Teachers) 1

Date Parental Permission Secured and Filed in Office 2/22/23

Trip Requested By: B. L. B.

Trip Received By: D. B. J. Date: 1/26/23

(Any field trip is subject to last minute cancellation due to local, state, national and/or international situations)



**SUFFOLK PUBLIC SCHOOLS**  
**Field Trip Instructional Objectives**

School Kings Fork HS  
Person completing the form Bernard Bradley  
Grade Level 8-12  
Date of Trip 2/23/23

*Listed below are the instructional objectives for the requested field trip:*

<i>Objectives:</i>	<i>Correlated Standard of Learning:</i>
The student will demonstrate collaboration and communication skills for music	III.5
The student will demonstrate music literacy	III.12
The student will demonstrate proper instrumental techniques	III.15

*This form must be attached to the Application for Field Trip.*