

School District of Hillsborough County

Teacher Notification

of School-Sponsored Activities

This form is used by students to make arrangements with teachers for the completion of work covered while out of class on school business. It must be in the Assistant Principal's office three days before the school-sponsored activity begins.

Student Request		
Print Student's Name <i>Candlelight Performance @ EPCOT</i>	Homeroom Number _____	Date of Activity 12/5/16
Reason for Activity		
Signature of Faculty Member Authorizing use of this form <i>Jeff Boggs</i>	Date of Authorization 11, 15, 16	

Teacher-Approved Work Make-up Plan

Use this matrix to record the schedule preferred by teachers for the completion of classwork covered while the student was out of class on school business.

Period	Class	Teacher's Name	Teacher's Initials under Preferred Plan		Date (Void if less than 3 days before event)
			Pre-submit work before event	Make up within 3 days after event	
HR					
1					
2					
3					
4					
5					
6					
7					
8					

Teacher Comment Section

Form must be turned in to the office three days prior to the field trip.

Signature of teacher is only notification that student will be attending a school-sponsored activity.

School District of Hillsborough County
APPLICATION FOR PARTICIPATION
Instructional Field Trips

This form is used for recording student requests to participate in instructional field trips and their parent or guardian's permission for them to participate and travel in specified transportation. It must be on file before a student may participate.

Student Request

I _____ am a student in Chorus
Print Name of Student Print Name of Class

class at Newsome High School.

My home address, including parent/guardian name: _____
Print Parent/Guardian Name

Print Home Street Address City State Zip
Home Phone Work Phone

The intent of this voluntary statement is to form an agreement in which I pledge my compliance with the policies in the Hillsborough County Student Handbook and to conduct myself on all field trips in such a manner as to bring honor to my school and myself in return for the privilege of being included as a participant in field trip activities.

Student's Signature Date of Signature

Parent/Guardian Request

As parent or guardian, I request that _____ participate
Print Student's Name

in the field trip to Candlelight @ EPCOT that will be conducted on 12 / 5 / 16
Print Name of Trip Destination Month / Day / Year

I understand that transportation for the trip will be provided by

- a private automobile of a parent, teacher, and/or licensed student, none of which is under control of School District of Hillsborough County.
- OR
- a regular school bus operated by the School District of Hillsborough County.
- OR
- a private bus under charter to the School District of Hillsborough County.

Signature of Student's Parent or Guardian Date of Signature

A copy of this form must be turned in to the office 3 days prior to the field trip.
Form SB60531 revised 5/23/03