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COMMUNITY SCHOOL DISTRICT

SY 26-27

NCSD OVERNIGHT, OUT-OF-STATE OR COUNTRY FIELD TRIP REQUEST FORM

0000127

Date Request Submitted (auto-populated) 12 weeks prior minimum	**Date of Request** 10/27/2026	**Type of Trip:** Out of State & Overnight
Dates of Trip	**Leave** 06/21/2027	**Return** 06/26/2027
Number of School Days Missed by Students	0	

TRIP INFORMATION

Requester's Name	Julia Tituskin, Megan Chapin-Dube, Hallie Smith, Phil Scavo
Requester's Building	Novi High School
Group/Class Traveling	Novi HOSA
Title of Field Trip	HOSA ILC 2027
Primary Destination	Philadelphia, Pennsylvania
Number of Attendees	NCSD Staff Chaperones 4 Non-Staff Chaperones 0 Students 50

Summary of Trip:

Students who compete at Michigan HOSA SLC and qualify for HOSA ILC will travel with us to Philadelphia. Itinerary for this trip is not yet set. Attached is the itinerary from HOSA ILC 2026 for your reference.

CURRICULUM (Required for Curricular Trips)

1.) What are the state standards and/or learning targets that tie into the proposed trip?

2.) Describe the class activities prior to the field trip that will integrate the field trip with the curriculum

3.) Why is the field trip the best way to achieve/reinforce the class learning targets?
4.) What follow-up activities will be used in the classroom/curriculum to assist the students in applying the knowledge gained on this trip?

OVERNIGHT, OUT OF STATE, OR OUT OF COUNTRY FIELD TRIPS

Have you coordinated this trip in the past?	Yes	If yes, when:	06/16/2026
If not, what is the most recent overnight trip you have coordinated? Please describe the destination, group traveling, and date.			
If you have never coordinated an overnight trip, it is required that a chaperone accompanying your group has done so.		Which chaperone has this experience?	

HOTEL ACCOMMODATIONS

Hotel Name If applicable	Philadelphia Marriott Downtown (tentative)	Address	1201 Market Street Philadelphia, Pennsylvania 19107
Contact Name	N/A	Phone #	2156252900
Link to Hotel:	https://www.marriott.com/en-us/hotels/phldt-philadelphia-marriott-downtown/overview/		

***DETAILED ITINERARY REQUIRED TO BE ATTACHED-(WILL COVER IF MORE THAN 1 HOTEL)**

TRANSPORTATION DETAILS

Transportation Method	Non-NCSD Transportation

CHARTER BUS INFORMATION

Charter Company	National Trails
Confirm the charter is on the MDOT-approved list	Yes
Outside Firm staff member pre-arranged with	Natalie Lozon
Contact Phone Number of Charter	248-353-9510
Email Address of Above	nataliel@nationaltrailsbus.com
Charter Bus Total Cost	$14,217

Segment 1 of Travel		
Departure Location Building Name & Address	Novi High School	Departure Date & Time 06/21/2027 7:30 AM
Destination Location Building Name & Address	Philadelphia Marriott Downtown (tentative)	Mileage for Segment 1

Segment 2 of Travel		
Departure Location Building Name & Address	Philadelphia Marriott Downtown (tentative)	Departure Date & Time 06/26/2027 8:00 AM
Destination Location Building Name & Address	Novi High School	Mileage for Segment 2

Segment 3 of Travel		
Departure Location Building Name & Address		Departure Date & Time
Destination Location Building Name & Address		Mileage for Segment 3

Segment 4 of Travel		
Departure Location Building Name & Address		Departure Date & Time
Destination Location Building Name & Address		Mileage for Segment 4

- **NCSD Buses are available from 9:30 to 1:30 for field trips on a regular school day.**
- **The bus must be back in the district no later than 1:30.**

E-Van Being Requested? • 2 adults and 8 students maximum • Transportation staff or teacher driving? • If teacher, mileage costs only. Must complete a Transportation Department form and provide a driver's license. • Maximum round trip: 90 miles due to battery life	NCSD Transportation to confirm availability and requirements during pre-arrangement.

Lift Bus Required	
Special Equipment Required	
Number of Students Using NCSD Vehicle Transportation	
Number of Adults Using NCSD Vehicle Transportation	
Students Per Bus Guideline: K-6: 70 students max MS & HS: 56 students max	Number of Buses Needed: Confirmed by Transportation:
Are drivers' meals, tickets, or fees included? Please specify details.	
Parking facilities on-site? Is there a cost? Are there any other costs?	
Type of trip	
NCSD BUS/VAN COSTS (COMPLETED BY TRANSPORTATION DEPT.)	
TOTAL MILES PER NCSD VEHICLE	
TOTAL HOURS PER NCSD DRIVER	

DRIVER HOURLY FLAT RATE FEE					
Day of the Week	# of Hours Per Vehicle	Fee Per Hour	Per Vehicle Total	X Number of Vehicles	Total Driver Rate
Mon-Fri		$30.00			
Saturday		$45.00			
Sunday		$60.00			
BUS/VAN MILEAGE FEE					
	Fee Per Mile	Number of Miles Per Vehicle		X Number of Vehicles	Total Mileage Cost
Round-trip Mileage	$3.00				
OTHER COSTS (Parking, etc) **If applicable, provide details in notes below.**					
TOTAL NCSD <u>ESTIMATED</u> BUS/VAN COST (MILEAGE FEE + DRIVER HOURLY FEE+ OTHER COSTS)					

Transportation Department Notes:

FIELD TRIP COST SUMMARY PER STUDENT	
EXPENSE: TOTAL ESTIMATED FIELD TRIP PER STUDENT	**$** 1,150
Estimated Expense Total Per Student	**Estimated Amount**
Paid by Students & Families	1000
Funded by Students During the Trip	150
**Funded by Other Sources	0

TOTAL TRIP EXPENSE FUNDING SOURCE: NCSD BUSINESS OFFICE REQUIRED INFORMATION				
Expense Item	**Expense Covered By**	**Account Number or N/A**	**Estimated Amount**	**Budget Review**
NCSD Bus/Van				
Non-NCSD Bus	Student Activity	61-296-7920-022-690-0000	$14,217	Reviewed
Admission Fees	Student Activity	61-296-7920-022-690-0000	$12,000	Reviewed
Food Expense	Other (See below**)	61-296-7920-022-690-0000	$7,500	Reviewed
Sub Expenses Per person/Per day $210 Full Day $112 Half Day	$0 cost	00-000-0000-000-000-0000	0	Reviewed
_____ Expenses				
_____ Expenses				
Notes: ** If expenses are covered by “Other”, provide details:				

APPROVAL TO COLLECT FUNDS		
Anticipated participants (qty)	Amt. Collected per participant ($)	Expected Total Collected
50	1,000	**$** 50,000.00
Account Name Where Funds will be Deposited		Account Number
HOSA		60-179-0000-022-690-0000
Name of Adult(s) present and responsible for collecting, counting, and turning in money to the school’s financial secretary on the day of sale.		Estimated Date (s) Money will be collected
Megan Chapin-Dube, Hallie Smith		May 3

By submitting this field trip form, you agree to collect these funds in compliance with district policies and acknowledge all District policies and procedures will be followed for cash handling and cash procedures.

- I understand that I am personally responsible for all funds collected and for keeping accurate records.
- I will provide all money received along with the name and amount turned in by the student [parent] to the financial secretary daily for deposits.
- I am responsible for completing the Event Balance Sheet and will turn in all records to the financial secretary within 5 school days of the money collection date.
- Collected monies are to be deposited a minimum of 5 business days prior to expenditures being paid out.

CHAPERONE INFORMATION

NCSD STAFF CHAPERONES - NUMBER EXPECTED: 4 COMPLETE INFO. BELOW

	Last Name	First Name	Cell Phone Number	Home Building	Sub Required? IF YES, CHAPERONE MUST REQUEST SUB IN RED ROVER
1	Chapin-Dube	Megan		Novi High School	No
2	Tituskin	Julia		Novi High School	No
3	Smith	Hallie		Novi High School	No
4	Scavo	Phillip		Novi High School	No
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Notes:

LINKS / ITEMS NEEDED TO PROCESS		
Links / Documents	When Needed	Process
NCSD Field Trip Permission Form - JT	Required for • All field trips. Completed, unsigned version required to process this request.	1. Choose a form option a. Digital Form b. Paper Form 2. Update with event details. 3. Attach an unsigned, updated form at the end of this process (scroll all the way to the bottom). If using the digital form, simply upload a document with the link you are sharing with families.
Detailed Itinerary JT	Required for: • All overnight, out of state or out of country field trips.	No required format. Must be attached at the end of this process (scroll all the way to the bottom).
Chaperone & Volunteer Non-Employment Background Request (ICHAT) JT	Required for: • All NON-NCSD chaperones	Please follow district guidelines found at link including allow 3 business days for your submission to be processed.
NCSD Health Forms JT	Required for all students: • Emergency Medical Release Form • Authorization for Administering Over-The-Counter Medication Required for students bringing Medications: • Medication Procedure Letter	Medication Instructions for Overnight Field Trips All forms must be reviewed by district nurses at least two weeks prior to the trip. JT
Student & Chaperone Rules and Responsibilities JT	Required for: • All overnight, out-of-state or out-of-country field trips.	Attach the NCSD Overnight, Out of State or Out of Country Rules and Responsibilities to the permission slip when distributing. (already linked in the digital form). Ensure that all chaperones have reviewed the chaperone responsibilities.
JT **RETAINING RECORDS AFTER THE TRIP:** Health forms, itineraries, proof of insurance, driver information, permission slips, transportation request forms, and trip mileage or any other information documenting the student trips must be retained (by the trip sponsor) for the remainder of the school year PLUS one additional year and then may be shredded.		
For More Details Please Review the NCSD Overnight, Out of State, Out of Country Field Trip Procedure		

APPROVAL PROCESS			
Staff Member	**Signature**	**Date**	**Action**
Requester's Signature	Julia Tituskin ~~Julia Tituskin [10/27/2026 9:36am EDT]~~	10/27/2026	**Submitted**
Transportation Dept. Prearrangement & Costs			**Prearrangement Reviewed**
Notes			
Requester Routes to Sponsoring Admin			**Routed (Used only if NCSD Transportation Requested)**
Sponsoring Administrator of Trip	Michelle Eathorne Michelle Eathorne [10/27/2026 9:46am EDT]	10/27/2026	Reviewed, okay to proceed.
Notes:			
Building Administrator	Nicole Carter ~~Nicole Carter [10/27/2026 10:03am EDT]~~	10/27/2026	Reviewed, okay to proceed
Notes:			
Budget Review	Mary Warra Mary Warra [10/28/2026 8:02am EDT]	10/28/2026	Reviewed, okay to proceed.
Notes:			
Director of Elementary			
Notes:			
Director of Secondary	Marci Augenstein Marci Augenstein [10/28/2026 1:00pm EDT]	10/28/2026	Reviewed, okay to proceed
Notes:			
Asst. Superintendent Teaching & Learning	Michael Giromini Michael Giromini [10/28/2026 1:09pm EDT]	10/28/2026	Reviewed, okay to proceed
Notes:			
Proposed Overnight, Out of State/Country Trip Executive Assistant, Superintendent & Board of Education	Deborah Beeker Deborah Beeker [10/28/2026 1:41pm EDT]	10/28/2026	**Expected Board Info/Discussion** 11/12/2026 **Expected Action for Approval** 11/12/2026
Notes:			
Board of Ed Decision			**Board of Education Decision**
Notes:			
Director of NCSD Transportation			
Notes:			
Completed form automatically copies the Transportation Secretary and Supervisor of Medical Services			