



HISD OUT OF STATE TRAVEL PROCEDURES



Date of Request: _____

Include supporting documentation (use reverse side if necessary). Submit all materials to the Principal a minimum of 45 days prior to the field trip.

Name of Class/Group:

4th grade

Destination(s):

Sai-Pnt, Shreveport

Brief Description of the Educational Learning Experience:

Date of Trip: 10.09.24

What is the total number of days students will be absent from school? 1

Number of students involved: 120

Number of chaperones: 8

Attach a sample permission form to be signed by parent/guardian.

- ◆ Please attach a list of the names of all students and chaperones attending this trip.
- ◆ Please attach an itinerary and breakdown of the estimated costs.

Manon Russell
Requesting Teacher's Signature

Principal's Signature

Superintendent's Signature of Approval

Board President's Signature

field trip



DESTINATION: Sciport - Shreveport, LA

GRADE: 4th

HOMEROOM TEACHER: Russell

NUMBER OF STUDENTS ATTENDING: 119

TOTAL COST OF TRIP: \$~~2,023~~²⁰⁴⁰ - includes 11 teachers

LOAD TIME: 8:15

RETURN TIME: 3:00

H BUS NEEDED? YES NO

STAFF DRIVERS ATTENDING: _____

NOTES: Daniel Plunk, Geoffrey Riley,
Skyla Garrett, Jordan Morales, Joshua Lane
need H Bus.

TEACHER REQUESTING: Mariam Russell

DATE SUBMITTED TO OFFICE: 9/3/24

****MUST ATTACH EMAIL CORRESPONDENCE FROM DESTINATION**

WITH TOTAL COST OF FIELD TRIP. MEALS WILL BE RESPONSIBILITY

9.3.24 -
req email w/ inv total
from Russell.

OF PARENT.

→ over

Red River STEM Inc.
820 Clyde Fant Pkwy
Shreveport, LA 71101 US
finance@sclport.org



INVOICE

BILL TO
Hallsville East
420 Galilee Road
Hallsville, TX 75650

SHIP TO
Hallsville East
420 Galilee Road
Hallsville, TX 75650

DATE 9/5/2024
TERMS Due on receipt
DUE DATE 10/9/2024

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
10/9/2024	General Admission + IMAX Combo	Students	119	\$ 17.00	\$ 2,023.00
10/9/2024	General Admission + IMAX Combo	Teachers (1 free teacher per 10 students)	12	\$ 17.00	\$ 17.00
		BALANCE DUE			\$2,040.00