



Lake Orion Community Schools

## Interoffice Memo

*from the Office of the Assistant Superintendent  
of Teaching and Learning*

**To:** Heidi Mercer, Superintendent

**From:** Drew Towlerton  
Assistant Superintendent of Teaching and Learning

**Date:** October 13, 2025

**RE:** Out of State Field Trip Request

---

Attached please find the following out of state field trip request for Board approval:

Name of Group: LOHS Model UN  
Location: Hyatt Regency Chicago  
Street Address: 151 E. Upper Wacker Drive  
City, State, Zip: Chicago IL 60601

Students: 25  
Chaperones: 2

Date(s) of trip: February 5-8, 2026

Days missed: 2

Staff/Trip Leader: Wendy Baekeroot



Lake  
Orion  
Community  
Schools

# FIELD TRIP AND TRANSPORTATION REQUEST FORM

Check If Board Approval Is Needed.

- ☐ Overnight  
☒ Out of State  
☐ CTE  
☐ International

Date Approved \_\_\_\_\_

**CALL PAM KING (ext. 2901) IN TRANSPORTATION TO CONFIRM AVAILABILITY OF BUS SERVICE BEFORE SCHEDULING.**

- For **DAYTIME** field trips, send completed form to the Office of the Assistant Superintendent of Teaching and Learning office **five working days** prior to departure.
- OUT-OF-STATE** field trips must be approved by the Board of Education **60** days prior to departure.
- IN-STATE**, overnight field trips must be approved by the Board of Education **30** days prior to departure.
- International field trips must be approved by the Board of Education no later than October of the year prior to the trip (e.g. October 2025 for the 2026-27 school year.)
- All requests are to be submitted to the Office of the Assistant Superintendent of Teaching and Learning 10 days prior to the Board meeting when approval will be sought.
- Upon approval, the Assistant Superintendent will forward the request to the Transportation Department; a copy will be emailed to the requesting building/person.
- Call Transportation two (2) days prior to departure to confirm paperwork was received and arrangements made. **DO NOT EMAIL. Pam's ext. 2901**
- Cost: \$65/hour LOCS staff requests; Add one (1) hour's cost (\$65) to each trip for pre-trip and post-trip travel time.

## FIELD TRIP INFORMATION (Complete all fields)

|                                                                                                                                                                                                                                                                                                                                                                                                                                         |                          |                                                                                                                                   |                                     |                                          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|------------------------------------------|
| Account Number<br>290-000-8630-0000-410-0000-41790000                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                   | Date<br>10/8/2025                   |                                          |
| Building<br>High School                                                                                                                                                                                                                                                                                                                                                                                                                 |                          | First, last name of trip leaders<br>Wendy Baeckeroot                                                                              |                                     |                                          |
| Transportation (please check one) # of Busses _____                                                                                                                                                                                                                                                                                                                                                                                     |                          | Name and address of destination<br>Hyatt Regency Chicago<br>151 E. Upper Wacker Drive<br>Chicago, IL 60601                        |                                     |                                          |
| <input checked="" type="checkbox"/> Tour Bus <input type="checkbox"/> District Bus <input type="checkbox"/> District Special Purpose Bus<br><input type="checkbox"/> Staff vehicle <input type="checkbox"/> Student Vehicle <input type="checkbox"/> Parent Vehicle <input type="checkbox"/> Plane                                                                                                                                      |                          |                                                                                                                                   |                                     |                                          |
| Group and/or grade level<br>9-12                                                                                                                                                                                                                                                                                                                                                                                                        |                          | <input type="checkbox"/> Field trip <input checked="" type="checkbox"/> Competition <input type="checkbox"/> CTE/Career Readiness |                                     |                                          |
| Date of Visit<br>Feb 5-8, 2026                                                                                                                                                                                                                                                                                                                                                                                                          | # of Students<br>25      | # of Chaperones<br>2                                                                                                              | Cell Phone Number of Trip Leader    |                                          |
| Date & Time Leaving<br>Feb 5, 6am                                                                                                                                                                                                                                                                                                                                                                                                       |                          | <input type="checkbox"/> Before 8:30 a.m.                                                                                         | Date & Time Returning<br>Feb 8, 9pm | <input type="checkbox"/> After 2:15 p.m. |
|                                                                                                                                                                                                                                                                                                                                                                                                                                         |                          |                                                                                                                                   | # of School Days Missed<br>2        |                                          |
| Objective for Visit (Include Standards, Benchmarks and Career Readiness targets that Field Trip addresses)<br><br>Model UN regional competition in Chicago, IL. We have been to this conference before when the Model UN group existed about 5 years ago. This is a great conference because everything is self contained at the hotel. As a side note - we actually take the train to get to and from Chicago out of the Troy station. |                          |                                                                                                                                   |                                     |                                          |
| Cost of Trip<br>\$450/pp                                                                                                                                                                                                                                                                                                                                                                                                                | Cost to Student<br>\$450 | How will trip be funded?<br>Self-funded                                                                                           |                                     |                                          |
| Building Administrator Signature<br>Daniel T. Haas                                                                                                                                                                                                                                                                                                                                                                                      |                          | Date<br>10-9-25                                                                                                                   |                                     |                                          |

## AUTHORIZATION

|                                                                                                                         |                                                                 |                        |
|-------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|------------------------|
| Education<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                        | Assistant Superintendent of Teaching and Learning Signature<br> | Date<br>10/12/25       |
| Transportation<br><input type="checkbox"/> Yes <input type="checkbox"/> No                                              | Director of Transportation Signature                            | Date                   |
| Board of Education - Overnight and international trips only<br><input type="checkbox"/> Yes <input type="checkbox"/> No |                                                                 | Board Member Signature |
|                                                                                                                         |                                                                 | Date                   |