

# Pickaway-Ross Career and Technology Center

## ACTIVITY REQUEST

Date of Requested Activity \_\_\_\_\_ Time \_\_\_\_\_ to \_\_\_\_\_ Location \_\_\_\_\_

Activity:  Social  Community Service  Instructional Supplement  Fund Raiser  Field Trip  Vehicle Use

Sponsor Group \_\_\_\_\_ Other Groups Involved \_\_\_\_\_

**Complete Appropriate Section(s) for Requested Activity**

### SOCIAL, COMMUNITY SERVICE, INSTRUCTIONAL SUPPLEMENT, OTHER

Description of Activity \_\_\_\_\_

Special Facility Arrangements \_\_\_\_\_

Outside Persons Involved \_\_\_\_\_

(Person Accepting Responsibility) \_\_\_\_\_ Date \_\_\_\_\_

### FUND RAISING ACTIVITIES

Description of Activity \_\_\_\_\_

Company Name and Address \_\_\_\_\_

Representative \_\_\_\_\_

Estimated Profit Margin \_\_\_\_\_ %

Quantity Ordered \_\_\_\_\_ Unit Cost \_\_\_\_\_ Unit Sale Price \_\_\_\_\_

(Person Accepting Responsibility) \_\_\_\_\_ Date \_\_\_\_\_

#### Activity Profit Statement

Purchases \_\_\_\_\_ @ \$ \_\_\_\_\_ = \$ \_\_\_\_\_

Less Returns \_\_\_\_\_ @ \$ \_\_\_\_\_ = \$ \_\_\_\_\_

Total \_\_\_\_\_ @ \$ \_\_\_\_\_ = \$ \_\_\_\_\_

Quantity of Items and/or Funds Unaccounted for: \_\_\_\_\_

Total Deposited with Cashier \$ \_\_\_\_\_

Explanation of any Discrepancy \_\_\_\_\_

### ACTIVITY EVALUATION

5  4  3  2  1 \_\_\_\_\_

Initiator \_\_\_\_\_ Date \_\_\_\_\_

5  4  3  2  1 \_\_\_\_\_

Supervisor \_\_\_\_\_ Date \_\_\_\_\_

Comments: \_\_\_\_\_

Rating Scale: (5) Excellent to (1) Poor

### FIELD TRIP AND VEHICLE USE AUTHORIZATION

Number of: Students \_\_\_\_\_ Staff \_\_\_\_\_

Other \_\_\_\_\_ Total \_\_\_\_\_

Purpose of Trip \_\_\_\_\_

Destination \_\_\_\_\_

Estimated Mileage \_\_\_\_\_

Vehicle Required:  School Bus  Truck

Personal Vehicle  Other \_\_\_\_\_

Departure Time: \_\_\_\_\_ Return Time: \_\_\_\_\_

Payment for Trip by:  Board Funds

Youth Activity Funds  Other \_\_\_\_\_

(Person Accepting Responsibility) \_\_\_\_\_ Date \_\_\_\_\_

#### To be Completed by Driver:

Vehicle \_\_\_\_\_

Number of Students \_\_\_\_\_ Miles Driven \_\_\_\_\_

Odometer Leave \_\_\_\_\_ Fuel Added \_\_\_\_\_

Odometer Return \_\_\_\_\_ Oil Added \_\_\_\_\_

#### Pre-Trip Check List

- |                                  |                                  |   |
|----------------------------------|----------------------------------|---|
| <input type="checkbox"/> Coolant | <input type="checkbox"/> Windows | <input type="checkbox"/> Seats            |
| <input type="checkbox"/> Fuel    | <input type="checkbox"/> Tires   | <input type="checkbox"/> Warning Flashers |
| <input type="checkbox"/> Oil     | <input type="checkbox"/> Wipers  | <input type="checkbox"/> Emergency Equip. |
| <input type="checkbox"/> Battery | <input type="checkbox"/> Lights  | <input type="checkbox"/> Brakes           |

Driver's Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments: \_\_\_\_\_

### APPROVAL

Approved  
 Not Approved \_\_\_\_\_  
Supervisor/Coordinator \_\_\_\_\_ Date \_\_\_\_\_

Approved  
 Not Approved \_\_\_\_\_  
Director \_\_\_\_\_ Date \_\_\_\_\_

#### (Required only for Field Trip)

Approved  
 Not Approved \_\_\_\_\_  
Superintendent \_\_\_\_\_ Date \_\_\_\_\_

