School-Related Student Trip Request Form

SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO THE TRIP.

SCHOOL ___SCHS.___ FACULTY MEMBER(S) SPONSORING TRIP _Eleschia Murphy_

TYPE OF TRIP (CHECK ONE):

☐ Classroom Field Trip ☐ Class Trip (i.e., junior, senior), specify_____

☐ Organization/Club Trip, specify_____ ☒ Other (athletic, band, if applicable)

DESTINATION ___WKU___ ADDRESS _1906 College Heights_ PHONE _270-745-0111_

☐ Out of State ☒ Out of County ☐ Within County _Bowling Green Ky 42101_

☐ Overnight: give name, address, phone of lodging _____

DATE(S) OF TRIP _1-26-13_ DEPARTURE TIME _10:00 am_ RETURN TIME _12:00 midnight_

PURPOSE/EDUCATIONAL VALUE _State Co-ed Cheer Competition._

SOURCE OF FUNDING FOR TRIP _Fundraising & parent contributions._

NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.

BILL TRIP EXPENSES TO:

☒ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☐ BOARD ☐ OTHER, SPECIFY_____

NUMBER OF STUDENTS _30_ FACULTY SPONSORS _2_ OTHER CHAPERONES_____

TOTAL # OF PARTICIPANTS _44_

MODE OF TRANSPORTATION

IS DISTRICT TRANSPORTATION NEEDED? ☐ NO ☒ YES, SEE PROCEDURE 09.36 AP.212.

☐ CERTIFICATED COMMON CARRIER; SPECIFY_____

☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)_____

SUPERVISION (Attach list of names of adults accompanying students on trip.)

Have all chaperones undergone the required records AOC check and been designated by the principal/designee to supervise students? ☒ YES ☐ NO

Eleschia Murphy _____ _1-9-13_
_____Signature of Faculty Sponsor_____ | _Date_

Trip has been ☒ approved ☐ disapproved. Reason for disapproval_____

Mike Marlen _____ _1-16-13_
Signature of Superintendent/Designee | _Date_

For overnight and/or out-of-state trips, approval of the superintendent and/or Board may be required by policy 09.36.

FIELD TRIP CHARGES

$.93 per mile
Regular hourly rate for driver, plus overtime if driver's hours exceed 40 per week

Admission to event provided by sponsor: ☒ Yes ☐ No

Overnight lodging : Single room
Driver time starts 15 min. before departure and ends 15 min. after arrival
Driver requested: 1. _Mitchell Bentley_

Meals provided by sponsor: ☒ Yes ☐ No

Send copy to lunchroom: ☐ Yes ☐ No
Bus limits: 2 persons per seat

Number of buses requested: _1_

White Copy - Central Office   Yellow Copy - Bus Driver   Pink Copy - School Sponsor