

STUDENTS

09.36 AP.21

School-Related Student Trip Request Form

SUBMIT THIS FORM ONE WEEK PRIOR TO THE NEXT REGULAR BOARD MEETING.

SCHOOL PHS FACULTY MEMBER(S) SPONSORING TRIP Simpkins

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 Bullitt East HS ADDRESS _____ PHONE _____

- ☐ Out of State ☒ Out of County ☐ Within County

☒ Overnight; give name, address, phone of lodging TBA

DATE(S) OF TRIP 4-15-22 - 4-16-22 DEPARTURE TIME 3:30pm RETURN TIME 10pm

PURPOSE/EDUCATIONAL VALUE Weekend Baseball Tournament

SOURCE OF FUNDING FOR TRIP Boosters

~~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 18 FACULTY SPONSORS 2 OTHER CHAPERONES _____

TOTAL # OF PARTICIPANTS 21

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 check and been designated by the principal/designee to supervise students? ☒ Yes ☐ No

Share Simpson
Signature of Faculty Sponsor

3/17/22
Date

Trip has been ☒ approved ☐ disapproved. Reason for disapproval _____

[Signature]
Signature of Superintendent/Designee

3/17/22
Date

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

RELATED PROCEDURES:

09.36 AP.211, 09.36 AP.212, 09.36 AP.22, 09.36 AP.23

Review/Revised: 8/20/01