

STUDENTS

09.36 AP.21

School-Related Student Trip Request Form

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

SCHOOL Pikeville High School FACULTY MEMBER(S) SPONSORING TRIP Laura Cooley

TYPE OF TRIP (CHECK ONE):

☐ Classroom Field Trip ☐ Class Trip (i.e., junior, senior), specify _____
☒ Organization/Club Trip, specify KYA ☐ Other (athletic, band, if applicable) _____
DESTINATION Crowne Plaza Hotel ADDRESS Phillips Ln., Louisville PHONE _____

☐ Out of State ☒ Out of County ☐ Within County
☒ Overnight; give name, address, phone of lodging Crowne Plaza Hotel, Phillips Ln., Louisville KY

DATE(S) OF TRIP Nov. 17-19, 2016 DEPARTURE TIME 8:30a RETURN TIME 5pm
Thurs. Sat.

PURPOSE/EDUCATIONAL VALUE Participate in state-wide model government

SOURCE OF FUNDING FOR TRIP Students self-pay

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 9 FACULTY SPONSORS 1 OTHER CHAPERONES _____

TOTAL # OF PARTICIPANTS 10

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

Laura J. Cooley
Signature of Faculty Sponsor

9/22/16
Date

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

[Signature]
Signature of Superintendent/Designee

9-23-16
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