

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 Bersaglia

TYPE OF TRIP (CHECK ONE):

- ☐ Classroom Field Trip ☐ Class Trip (i.e., junior, senior), specify _____
☐ Organization/Club Trip, specify _____ ☒ Other (athletic, band, if applicable) Band

DESTINATION Paintsville, Ky ADDRESS See below PHONE (606) 789-4242

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

☒ Overnight; give name, address, phone of lodging Canada Inn634 James Trumble Blvd. Paintsville 41240DATE(S) OF TRIP Apr 12-25 DEPARTURE TIME 8:00 PM RETURN TIME 11:00 AMPURPOSE/EDUCATIONAL VALUE Junior High All-District BandSenior High District Jazz BandSOURCE OF FUNDING FOR TRIP Fundraising

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 c. 30 FACULTY SPONSORS 1 OTHER CHAPERONES 0TOTAL # OF PARTICIPANTS 22 SCOTT BERSAGLIA

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

Scott Bersaglia
 Signature of Faculty Sponsor

16 Jan. 2017
 Date

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

D. J. Smith
 Signature of Superintendent/Designee

2-13-17

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.23

Review/Revised:8/20/01