## School-Related Student Trip Request Form

SUBMIT THIS FOR	MONE WEEK PRIOR TO THE I	NEXT REGULAR BOARD MEETING	
SCHOOL PIKEVILL	FACULTY MEMB	er(s) sponsoring trip 416 Black	Bu
TYPE OF TRIP (CHECK ONE):			
☐ Classroom Field Trip ☐ Cl	ass Trip (i.e., junior, senior), pecify  ADDRESS	specify	
Out of State A Out of Con Overnight; give name, addr	unty Within County ress, phone of lodging Boy	ment INN & Suites, 606-523-9040 TIME 3:30pm RETURN TIME ment for Jr. HILL BASES	· ·
SOURCE OF FUNDING FOR TRI	P HIBH School Box	oster Club	
SOURCE OF FUNDING FOR TRO	DENIED THE TRIP BECAUSE	OF AN INABILITY TO PAY.	
NUMBER OF: STUDENTS  TOTAL# OF PAR  MODE OF TRANSPORTATION  IS DISTRICT TRANSPORTATION	DIGITAL SP	ON SCHOOL COUNCIL BOARD OF OTHER CHAPER  Onsors 4 OTHER CHAPER  Onches; Lyle Blackboxed  JAKE SOKOL  SHADD WALLES  ROB WALLES  ROB WALLES  YES, SEE PROCEDURE 09.36 AP.2	ONES
CERTIFICATED CO.	TE ALLOWED BY POLICY; S'	PECIFY DRIVER(S)	
SUPERVISION (ATTACH LIST Have all chaperones under principal designed to supervision of the control of the cont	OF NAMES OF ADULTS ACCO	OMPANYING STUDENTS ON TRIP.) ords check and been designated by	
	proved. Reason for disapproval		
The has occir in approved in the province in t			-
DPD_		5-4-17 Date	
Signature of Superintende	u/Designee approval of the Superintendent as	nd/or Board may be required by policy 09.36.	
I For overnight and/or out-of-state trips	approvative dis 2 spins		

RELATED PROCEDURES:

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

Review/Revised: 8/20/01