School-Related Student Trip & Vehicle Request Form

SUBMIT THIS FORM FIVE (5) DAYS PRIOR TO THE TRIP.
SCHOOL LYNNESTON CO. MISSRE SCHOOL FACULTY MEMBER(S) SPONSORING TRIP JERESA (QUERTMANN) LEMS BASEONE
DESTINATION County Co. HS ADDRESS PHONE
☐ Out of State or over 149 mile radius (requires Superintendent or Board approval) ☐ Overnight; give name, address, phone of lodging
DATE(S) OF TRIP 9-23-17 DEPARTURE TIME 9:15 AM RETURN TIME 5:00 pm
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.
BILL TRIP EXPENSES TO: L'SPONSORING ORGANIZATION I SCHOOL COUNCIL II BOARD II OTHER, SPECIFY <u>ICMS</u> JR SZAMONA CUB
Number of: Students /5 FACULTY SPONSORS / OTHER CHAPERONES
MODE OF TRANSPORTATION DISTRICT OWNED BUS (SPECIFY # NEEDED) LUGGAGE CARRIER? (SPECIFY)
☐ DISTRICT OWNED VEHICLE(S) (SPECIFY)
☐ CERTIFICATED COMMON CARRIER; SPECIFY
☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)
METHOD OF PAYMENT: (LIST THE FUNDING ON HOW THE TRIP WILL BE PAID.)
BILL TO LONG JA STAMOUS CLUB
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?
By signing this form I verify that I have read and comply with Board Policy 09.36
Calletter 9-20-17
Signature of Faculty Sponsor Date
Trip has been approved a disapproved. Reason for disapproval
9-7-17
Signaure 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.

RELATED PROCEDURES:

09.36 (All procedures)

Review/Revised:9/12/2016