

School-Related Student Trip & Vehicle Request Form

SUBMIT THIS FORM FIVE (5) DAYS PRIOR TO THE TRIP.

SCHOOL Livingston Central FACULTY MEMBER(S) SPONSORING TRIP Bill McNamara
Stephen Madolux Larry McGregor
 DESTINATION Larue Co. HS. ADDRESS Hodgenville, Ky PHONE _____
☐ Out of State or over 149 mile radius (requires Superintendent or Board approval)
☒ Overnight; give name, address, phone of lodging TBD (Local Lodging in Elizabethtown)

DATE(S) OF TRIP Dec 28-30th 2017 DEPARTURE TIME 8:00am RETURN TIME TBD

NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.

BILL TRIP EXPENSES TO: ☐ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☐ BOARD ☐ OTHER,
 SPECIFY Booster Club / Boys Basketball Acct.

NUMBER OF: STUDENTS 20 FACULTY SPONSORS 3 OTHER CHAPERONES _____
 TOTAL # OF PARTICIPANTS _____

MODE OF TRANSPORTATION

☐ DISTRICT OWNED BUS (SPECIFY # NEEDED) _____ LUGGAGE CARRIER? (SPECIFY) _____

☒ DISTRICT OWNED VEHICLE(S) (SPECIFY) Suburbans

☐ 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.) _____

Booster Club / Basketball Boys Acct.

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

By signing this form I verify that I have read and comply with Board Policy 09.36

Bill McNamara
 Signature of Faculty Sponsor

8-29-2017
 Date

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

Scott Ray
 Signature of Superintendent/Designee

9/12/17
 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 (All procedures)

Review/Revised: 9/12/2016