

STUDENT'S

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 ^{Kentucky} Youth Assembly ☐ Other (athletic, band, if applicable) _____
DESTINATION Crown Plaza Hotel ADDRESS Phillips Ln, Louisville PHONE (502) 367-2251

☐ Out of State ☒ Out of County ☐ Within County
☒ Overnight; give name, address, phone of lodging Crown Plaza Hotel, Louisville KY

DATE(S) OF TRIP November 16-18 DEPARTURE TIME 8:15 AM RETURN TIME 5 pm
(Thursday) Saturday

PURPOSE/EDUCATIONAL VALUE _____
Students will learn about the legislative process by participating in it
SOURCE OF FUNDING FOR TRIP Students/Parents

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 ~13 FACULTY SPONSORS 1 OTHER CHAPERONES _____
TOTAL # OF PARTICIPANTS 14

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

10/2/17
Date

Trip has been ☐ approved ☐ disapproved. Reason for disapproval _____
Don
Signature of Superintendent/Designee
10-2-17
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.22, 09.36 AP.23

Review/Revised: 8/20/01