

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 PHS FACULTY MEMBER(S) SPONSORING TRIP Prater

TYPE OF TRIP (CHECK ONE):

☐ Classroom Field Trip ☐ Class Trip (i.e., junior, senior), specify \_\_\_\_\_  
☒ Organization/Club Trip, specify Beta State ☐ Other (athletic, band, if applicable) \_\_\_\_\_

DESTINATION Lexington ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

☒ Out of State ☒ Out of County ☐ Within County  
☒ Overnight; give name, address, phone of lodging Campbell House

DATE(S) OF TRIP 1/28-1/30 DEPARTURE TIME TBA RETURN TIME TBA

PURPOSE/EDUCATIONAL VALUE State Competition

SOURCE OF FUNDING FOR TRIP Beta Club

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 45 FACULTY SPONSORS 1 OTHER CHAPERONES \_\_\_\_\_

TOTAL # OF PARTICIPANTS 47

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

Mary Anne Pate  
Signature of Faculty Sponsor

1/9/18  
Date

Trip has been ☐ approved ☐ disapproved. Reason for disapproval \_\_\_\_\_

[Signature]  
Signature of Superintendent/Designee

1-10-18  
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

TBA - To Be Arranged