

STUDENTS

09.36 AP.21

School-Related Student Trip Request Form

SUBMIT THIS FORM ONE WEEK PRIOR TO THE NEXT REGULAR BOARD MEETING.

SCHOOL OJHS FACULTY MEMBER(S) SPONSORING TRIP OREM

TYPE OF TRIP (CHECK ONE):

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

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

☐ Out of State ☐ Out of County ☐ Within County  
☒ Overnight; give name, address, phone of lodging Hampton Inn

DATE(S) OF TRIP June 20-22 DEPARTURE TIME 9:00am RETURN TIME \_\_\_\_\_

PURPOSE/EDUCATIONAL VALUE UK Basketball Camp

SOURCE OF FUNDING FOR TRIP Boosters

*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 18 FACULTY SPONSORS 3 OTHER CHAPERONES \_\_\_\_\_

TOTAL # OF PARTICIPANTS 21

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

[Signature]  
Signature of Faculty Sponsor

May 10, 18  
Date

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

[Signature]  
Signature of Superintendent/Designee

5-10-18  
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