

School-Related Student Trip Request Form

Section 1 (To be completed by requesting organization – Incomplete forms will be returned, causing a delay in scheduling transportation for the event.)

Date of Request 8-28-18 Date of Event Sept-27-28
 Organization Beta Club/GT School TCCHS
 Number of Passengers _____

Type of Trip (Circle One)

- ☐ In-County Instructional ☐ In-County Athletic ☐ Other: (Explain in detail)
☒ Out-of-County Instructional ☐ Out-of-County Athletic
☐ Out-of-State Instructional ☐ Out-of-State Athletic

Destination (Event, City, and State) Beta Club Leadership Summit

Planned Stops to and from NONE

Departing location High School Date of Departure 9/27 Time of Departure 4:30 pm

Returning location High School Date of Return 9/28 Time of Return 5:00 pm

Chaperone(s) Lisa Petrie Chaperone's Phone # _____

Special Requests (Check One)

- ☒ Van ☐ Wheelchair Accessible ☐ Other: Monitor ☐ Other (Explain in Detail)

If requesting the van, has the person driving been certified and approved to drive? ☒ Yes ☐ No (Check one)

Person Driving Van Lisa Petrie Trip Requested By: Lisa Petrie

Organization Responsible for Payment VAN = GT / Registration & Room for student Beta
 Approval of Site Based Council Representative [Signature] Date _____

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District Use Only

Section 2

Approval of District Representative _____ Date _____

DRIVER – TURN THIS FORM IN WITH TIMESHEETS

Section 3

Date/Time Departure: _____ Odometer Start: _____

Date/Time Return: _____ Odometer End: _____

I hereby certify that the above information is correct to the best of my knowledge.

Driver Signature _____ Date _____

Driver Comments:

Coach or School Representative Signature _____ Date _____

Review/Revised:4/9/2018



one
**LEADERSHIP
SUMMIT**

one
**TRANSFORMED
FUTURE**

SLOAN CONVENTION CENTER BOWLING GREEN, KENTUCKY

SEPTEMBER 27-28, 2018 DEADLINE FOR REGISTRATION: SEPTEMBER 12, 2018

National **BETA**

Request to Place an Item on the AgendaName: Lisa PetrieAddress: TCHSTelephone number: 270-498-0452Name of school children attend, if applicable: Beta Club OfficersGroup represented: Beta ClubCheck if request was submitted to: ☒ Superintendent ☐ Board Chairperson

Conferred with following administrators (names): _____

Description of Issue: OVERNIGHT TRIP to
The Beta Club Leadership Summit Sept 27-28

Specific Action Requested: _____

Check if you are: ☐ Board Member ☒ District Employee ☐ Community Member

All requests for items to be placed on the agenda must be submitted to the Superintendent prior to the Board meeting as specified in Board Policy 01.45. Items submitted shall require prior approval of the Superintendent.

Review/Revised: 3/13/06