School-Related Student Trip/Vehicle Request Form

SUBMIT THIS FORM TWO WEEKS PRIOR TO THE TRIP.						
SCHOOL GALLATING V			PRING TRIP Kelly	Herefore		
☐ Classroom Field Trip			· · · · · · · · · · · · · · · · · · ·			
Organization/Club Trip						
Destination TRUNK MAZ	a totel	Address	Phone _	-		
☐ Out of State ☐ C			FORES.			
Overnight; give name, a	ddress, phone of loc	Iging rouse Ma	20 Hotel			
Date of Request 3/18/19	Data of Tuin 2/1/1/2	51/11/2 KY 402	502-3	67, 200		
Date of Kednest 3/10/14	Date of Trip 134-1	with the shukkednesting	very Heren	9/7(
Departure Time <u>\\COm</u> Re			-	nes		
ATTA	CH LIST OF NAME	S OF ADULTS/STUDENT	S ON TRIP			
Faculty Sponsor (Certified Pe	+DC+OC rson Responsible for Stu	dent)	£000 ₁₀			
		SBDM Chair	Brenda Bars	ling		
Charged to/Source of Fundin	g	Have all chaperones b	peen approved?	Yes D No		
Meals Required: □ S	ack Lunch	☐ Fast Food ☐ Other	Mone			
List Special Equipment To B	e Transported—Iten	ns Which Cannot Be Held	In Lap.			
Number Of Buses Requested	Reg	ular Bus Speci	al Needs Bus	Van <u>a</u>		
	Ratio of Stud	dents to Adults				
	High School	20 to 1				
	Middle School					
477	Elementary	5 to 1	1 000 B			
	**	timate cost is \$1/mile an	· •			
	tion to be complete	d by Transportation/Ce	ntral Office.			
Frip Calculation Bus X	\$1,00 = \$	Mileage	Bill to:			
Total Miles	Ψ1,00 — Φ	Mueage	Dili to:			
X	<u> </u>	Driver Rate				
Avg. OT Rate = \$	<u> </u>	Total				
of Buses Approved:	Approval of Tran	sportation Director:		Date		
Acceptance by Driver:	*		Date			
For overnight and/or ou	tt-of-state trips, app	proval of the Superinten	dent and Board is re	equired.		
Superintendent	Date	Board Ch	airperson	Date		

RELATED PROCEDURES:

09.36 AP.211, 09.36 AP.23

Review/Revised:6/22/09

KUNA Conference March 24-26, 2019 Crowne Plaza Hotel Louisville, KY

Chaperone/Advisor – Kelly Hereford

Students:		
Parker Keyes		
Makenzie Bussell		
Jordan Cain		
Heidi Lopez		
Madison Scudder		
Carly Towles		
Jada Towles		
Olivia Oechsner		
Claire Epifanio		
Mylee Bledsoe		