

**School-Related Student Trip Request Form**

SUBMIT THIS FORM ONE WEEK PRIOR TO THE BOARD MEETING.
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FACULTY MEMBER(S) SPONSORING TRIP JOSH WALTON

## TYPE OF TRIP (CHECK ONE):

- ☐ Classroom Field Trip ☒ Class Trip (i.e., junior, senior), specify 5th Grade  
☐ Organization/Club Trip, specify \_\_\_\_\_ ☐ Other (athletic, band, if applicable) \_\_\_\_\_

DESTINATION NKU ADDRESS LOUIE B NUNN DR, HIGHLAND HEIGHTS, KY 41099 PHONE \_\_\_\_\_

- ☐ Out of State ☐ Out of County ☒ Within County  
☐ Overnight; give name, address, phone of lodging \_\_\_\_\_

DATE(S) OF TRIP APRIL 17, 2018 DEPARTURE TIME 9:00 AM RETURN TIME 1:00 PMPURPOSE/EDUCATIONAL VALUE THIS TRIP MARKS THE CULMINATION OF THE DANNY DOLLAR ACADEMY FOR THE 5<sup>TH</sup> GRADE CLASS. THEY WILL MEET THE AUTHOR AND PRESENT THEIR BUSINESS PLAN RESULTS TO OTHER STUDENTS.SOURCE OF FUNDING FOR TRIP THE 5<sup>TH</sup> GRADE CLASS IS SELLING T-SHIRTS, ETC.*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 19 FACULTY SPONSORS 1 OTHER CHAPERONES 2  
 TOTAL # OF PARTICIPANTS 22

## MODE OF TRANSPORTATION

- ☒ CERTIFICATED COMMON CARRIER; SPECIFY Newport Ind. Schools Bus  
☐ PRIVATE VEHICLE, AS ALLOWED BY POLICY; SPECIFY DRIVER(S) \_\_\_\_\_

SUPERVISION (ATTACH LIST OF NAMES OF ADULTS ACCOMPANYING STUDENTS ON TRIP.)

Josh Walton  
HOPE SHARPHave all chaperones undergone the required records check and been designated by the principal/designee to supervise students? ☐ Yes ☐ No GEN Kinyplouts

*Josh Walton*  
 Signature of Faculty Sponsor

4/10/19  
 Date

Trip has been <input type="checkbox"/> approved <input type="checkbox"/> disapproved. Reason for disapproval _____	
_____ Signature of Board Chairperson	_____ Date

For overnight and/or out-of-state trips, approval of the Board may be required by policy 09.36.

## RELATED PROCEDURES:

09.36 AP.211, 09.36 AP.23

Review/Revised: 7/11/13