School-Related Student Trip Request Form

CLIDMIT THIS FORM ONE WEEK DRIOD TO THE DOLDEN WEETING
SUBMIT THIS FORM ONE WEEK PRIOR TO THE BOARD MEETING.
FACULTY MEMBER(S) SPONSORING TRIP: SHARYL IDEN
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: ED-MAR DAIRY FARM ADDRESS: 1034 WALTON NICHOLSON RD. WALTON, KY
PHONE: 859-620-1860
☐ Out of State ☑ Out of County ☐ Within County ☐ Overnight; give name, address, phone of lodging
DATE(S) OF TRIP: TUESDAY, 10/15 DEPARTURE TIME: 8:30AM RETURN TIME: 2:30PM
PURPOSE/EDUCATIONAL VALUE: THE DISTRICT IS PARTICIPATING IN THE "FARM TO SCHOOL" WEEK WHERE STUDENTS AND THEIR FAMILIES ARE EMPOWERED TO MAKE INFORMED CHOICES ABOUT FOOD. THE SCHOOL CAFETERIA WILL ALSO BE OFFERING A VARIETY OF FARM FOOD CHOICES DURING THE FARM TO SCHOOL WEEK.
SOURCE OF FUNDING FOR TRIP: PARENTS PAY THE FEE FOR THE FARM AND TRANSPORTATION 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: 170 FACULTY SPONSORS: 25 OTHER CHAPERONES TOTAL # OF PARTICIPANTS: 195
MODE OF TRANSPORTATION
☑ CERTIFICATED COMMON CARRIER; SPECIFY: KENTON COUNTY SCHOOL DISTRICT BUSES
☐ PRIVATE VEHICLE, AS 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
They Ida 10/9/19
Signature of Faculty Sponsor Date
Trip has been □ approved □ 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:

99.36 AP.211, 09.36 AP.23