

Fee 20⁰¹²

Local

School-Related Student Trip Request Form

SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO THE TRIP

SCHOOL SCHS FACULTY MEMBER(S) SPONSORING TRIP Gardner, Langley
TYPE OF TRIP (CHECK ONE)

☐ Classroom Field Trip ☐ Class Trip (i.e., junior, senior), specify _____

☒ Organization/Club Trip, specify Art Club ☐ Other (athletic, band, if applicable)

DESTINATION Speed Art Museum ADDRESS 2035 S. 3rd St. PHONE 502-634-2700

☐ Out of State ☒ Out of County ☐ Within County

☐ Overnight: give name, address, phone of lodging _____

DATE(S) OF TRIP November TBD DEPARTURE TIME 8am RETURN TIME 2pm

PURPOSE/EDUCATIONAL VALUE guided tour of art museum, discussion of artist skills, purpose, abilities, etc.

SOURCE OF FUNDING FOR TRIP Student Fee

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 30 FACULTY SPONSORS 2 OTHER CHAPERONES 1 (Flood)

TOTAL # OF PARTICIPANTS 33

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 AOC check and been designated by the principal/designee to supervise students? ☒ YES ☐ NO

Signature of Faculty Sponsor _____

9/23/19
Date

Trip has been ☐ approved ☐ disapproved. Reason for disapproval _____

Signature of Superintendent/Designee _____

10/7/19

Date

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

FIELD TRIP CHARGES

\$.93 per mile

Meals provided by sponsor: ☐ Yes ☐ No

Regular hourly rate for driver, plus overtime if driver's hours
Exceed 40 per week.

Send copy to lunchroom? ☐ Yes ☐ No

Admission to event provided by sponsor: ☐ Yes ☐ No

Bus limits: 2 persons per seat

Overnight lodging: Single room

Drive time starts 15 min. before departure and ends 15 minutes after arrival

Driver requested: 1. _____ 2. _____ Number of buses requested: 1

White Copy - Central Office

Yellow Copy - Bus Driver

Pink Copy - School Sponsor