School-Related Student Trip Request Form

INSTRUCTIONS

- 1. Requests for trips (athletic events, conferences, field trips, etc....) must be submitted 3 weeks prior to trip.
- 2. Requests for overnight or out-of-state trips must be submitted 6 weeks prior to trip.
- 3. Please attach a tentative transportation itinerary, including any planned stops.
- 4. If overnight trip, attach name, address and phone number of lodging.

SCHOOL ACTO FACULTY MEMBER IN CHARGE M. Rother M. Tramme
TYPE OF TRIP (CHECK ONE):
Classroom Field Trip Organization/Club Trip, specify DECA Class Trip (i.e. junior, senior), specify Other (Athletic, etc) specify,
DESTINATION: Galf HUKE ADDRESS 104 N 4th Street PHONE (502) 589-520
Out of State Out of County Within County Overnight
DATE(S) OF TRIP March 1-3, 2020 TIME YOU PLAN TO DEPART FROM SCHOOL 1 pm
APPROXIMATE TIME YOU PLAN TO BE BACK AT SCHOOL 4:00 mm
PURPOSE/EDUCATIONAL VALUE Students (DECA) to compete @ State level.
BILL TRIP EXPENSES TO: DECA
Attach a description of estimated expenses including, but not limited to, lodging, meals, registration, and all other anticipated travel expenses.
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY
NUMBER OF: Students 24 est. Faculty Sponsors 2 Other Chaperones Total # of Participants (Riders)
MODE OF TRANSPORTATION
Is District Transportation Needed? No Yes, see Procedure 09.36 AP.212 Certificated Common Carrier (i.e. Charter Bus), specify company Private Vehicle, if allowed by policy; specify driver(s)
Any special transportation needs? (e.g. under storage compartments for luggage, etc) /// // // // // // // // // // // // /
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
Signature of Eaculty Sponsor Date
Trip has been approved disapproved, reason for disapproval
Signature of Superintendent/Designee For overnight and/or out of state trips, approval of thee Superintendent and/or Board may be required by policy 09.36.

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TY	E OF TRIP (CHECK ONE):
	Classroom Field Trip Organization/Club Trip, specify DECA
	Class Trip (i.e. junior, senior), specify Other (Athletic, etc) specify,
DE	TINATION: 1000 Hollary Inn VI ADDRESS 920 Gradway Now PHONE 615-249-0150
	Out of State April 17 Out of County Within County Overnight
	E(S) OF TRIP HOLD HOLD STONE YOU PLAN TO DEPART FROM SCHOOL 4:00 CONTRACTOR TO THE TOTAL AND THE PROPERTY OF THE TRUE YOU PLAN TO DEPART FROM SCHOOL 4:00 CONTRACTOR TO THE TRUE YOU PLAN TO DEPART FROM SCHOOL 4:00 CONTRACTOR TO THE TRUE YOU PLAN TO DEPART FROM SCHOOL 4:00 CONTRACTOR TO THE TRUE YOU PLAN TO DEPART FROM SCHOOL 4:00 CONTRACTOR TO THE TRUE YOU PLAN TO DEPART FROM SCHOOL 4:00 CONTRACTOR TO THE TRUE YOU PLAN TO DEPART FROM SCHOOL 4:00 CONTRACTOR TO THE TRUE YOU PLAN TO DEPART FROM SCHOOL 4:00 CONTRACTOR TO THE TRUE YOU PLAN TO DEPART FROM SCHOOL 4:00 CONTRACTOR TO THE TRUE YOU PLAN TO DEPART FROM SCHOOL 4:00 CONTRACTOR TO THE TRUE YOU PLAN TO DEPART FROM SCHOOL 4:00 CONTRACTOR TO THE TRUE YOU PLAN TO DEPART FROM SCHOOL 4:00 CONTRACTOR TO THE TRUE YOU PLAN TO DEPART FROM SCHOOL 4:00 CONTRACTOR TO THE TRUE YOU PLAN TO THE YOU PLAN TO THE YOU PLAN TO THE TRUE YOU PLAN TO THE YOU PLA
AP	ROXIMATE TIME YOU PLAN TO BE BACK AT SCHOOL
	POSE/EDUCATIONAL VALUE students to compete in DELA quents @ international le
	TRIP EXPENSES TO: DEVA
	ttach a description of estimated expenses including, but not limited to, lodging, meals, registration, ad all other anticipated travel expenses.
	NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY
NUI	BER OF: Students 30 651 Faculty Sponsors 7 Other Chaperones Total # of Participants (Riders) 32
MO	E OF TRANSPORTATION
]	District Transportation Needed? No Yes, see Procedure 09.36 AP.212
	Certificated Common Carrier (i.e. Charter Bus), specify company
	Any special transportation needs? (e.g. under storage compartments for luggage, etc)
SUP	RVISION (ATTACHLIST OF NAMES OF ADULTS ACCOMPANYING STUDENTS ON TRIP)
t	we all chaperones undergone the required records check and been designated by the principal/designee supervise students? Yes No
(<u> </u>	101519
F	Signature of Faculty Sponsor Date
	Frip has been approved disapproved, reason for disapproval
- (- feet on live 10/16/2017
	Signature of Superintendent/Designee or overnight and/or out of state trips, approval of thee Superintendent and/or Board may be required by policy 09.36.
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