

# School-Related Student Trip Request Form

Section 1 (To be completed by requesting organization – Incomplete forms will be returned, causing a delay in scheduling transportation for the event)

Date of Request: 11/11/2019      Date of Event: 12/15/2019

Organization: TCCHS Cheerleading      School: TCCHS

Number of Passengers: 20

Type of Trip (Check One)

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> In-County Instructional     | <input type="checkbox"/> In-County Athletic               | <input type="checkbox"/> Other: (Explain in Detail) |
| <input type="checkbox"/> Out-of-County Instructional | <input type="checkbox"/> Out-of-County Athletic           |   |
| <input type="checkbox"/> Out-of-State Instructional  | <input checked="" type="checkbox"/> Out-Of-State Athletic |   |

Destination (Event, City, and State): Cheer Competition, Cape Girardeau, Mo.

Planned Stops To and From: Click here to enter text.

Departing Location: TCCHS Annex      Date of Departure: 12/15/2019      Time of Departure: To be determined when schedule is posted

Returning Location: TCCHS Annex      Date of Return: 12/15/2019      Time of Return: To be determined when schedule is posted

Chaperone/s: Brandy Klees, Amber Gant      Chaperone's Phone: 270-604-9585, 270-839-8932

Special Requests (Check One)

- |                              |  |                                  |   |
|------------------------------|--|----------------------------------|---|
| <input type="checkbox"/> Van | <input type="checkbox"/> Wheelchair Accessible | <input type="checkbox"/> Monitor | <input type="checkbox"/> Other: (Explain in Detail) |
|------------------------------|--|----------------------------------|---|

If requesting the Van, has the person driving been certified and approved to drive?  Yes       No (Check One)

Person Driving Van: Parents will provide transportation

Trip Requested By: Brandy Klees

Organization Responsible for Payment: TCCHS Athletics

Approval of Site Based Council Representative  Date \_\_\_\_\_

Section 2

DISTRICT USE ONLY

Approval of District Representative \_\_\_\_\_ Date: \_\_\_\_\_

Section 3

DRIVER – TURN THIS FORM IN WITH TIMESHEETS

Date/Time of Departure: \_\_\_\_\_ Odometer Start: \_\_\_\_\_

Date/Time of Return: \_\_\_\_\_ Odometer End: \_\_\_\_\_

I hereby certify that the above information is correct to the best of my knowledge.

Driver Signature \_\_\_\_\_ Date \_\_\_\_\_

Driver Comments:

Coach or School Representative Signature \_\_\_\_\_ Date \_\_\_\_\_

Request to Place an Item on the Agenda

Name: Brandy Kless

Address: TCCHS

Telephone number: 270-265-2506

Name of school children attend, if applicable: \_\_\_\_\_

Group represented: TCCHS Cheerleading

Check if request was submitted to:  Superintendent  Board Chairperson

Conferred with following administrators (names): Deatrick Kinney

Description of Issue: Cheer Competition

Specific Action Requested: permission to travel out-of-state (Cape Girardeau, Missouri) for a cheer competition

Check if you are:  Board Member  District Employee  Community Member

All requests for items to be placed on the agenda must be submitted to the Superintendent prior to the Board meeting as specified in Board Policy 01.45. Items submitted shall require prior approval of the Superintendent.

Review/Revised: 3/13/06