

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 ACS/HS FACULTY MEMBER IN CHARGE Farris

TYPE OF TRIP (CHECK ONE):

Classroom Field Trip ☐ Organization/Club Trip, specify FCCLA State meeting
 Class Trip (i.e. junior, senior), specify _____ Other (Athletic, etc...) specify, _____

DESTINATION: Galt House / Conv. Ctr. ADDRESS Louisville, KY PHONE _____

Out of State ☐ Out of County ☐ Within County ☐ Overnight ☒

DATE(S) OF TRIP March 23-27 2020 TIME YOU PLAN TO DEPART FROM SCHOOL Monday 23/Noon CSTAPPROXIMATE TIME YOU PLAN TO BE BACK AT SCHOOL Friday 27 Noon EST March 23/Noon CSTPURPOSE/EDUCATIONAL VALUE Competition Friday 27 Noon EST March 23/Noon CSTBILL TRIP EXPENSES TO: FCCLA

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 15 Faculty Sponsors 2 Other Chaperones _____
 Total # of Participants (Riders) 17

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...) under storage
needed for luggage and supplies

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 Faculty Sponsor

Date

Trip has been ☒ approved ☐ disapproved, reason for disapproval _____

Signature of Superintendent/Designee

Date

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