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 ACCTC   FACULTY MEMBER IN CHARGE Monica Bean

TYPE OF TRIP (CHECK ONE):

Classroom Field Trip   (Organization/Club Trip, specify) FBLA

Class Trip (i.e. junior, senior), specify _____   Other (Athletic, etc...) specify, _____

DESTINATION: Galt House Hotel   ADDRESS 140 North 4th St. PHONE (502) 589-5200
                                             Louisville, KY

Out of State   Out of County   Within County ✓   (Overnight)

DATE(S) OF TRIP 4/20 to 4/22   TIME YOU PLAN TO DEPART FROM SCHOOL 9:00 AM on 4/20
              M-T-W

APPROXIMATE TIME YOU PLAN TO BE BACK AT SCHOOL 2:15 PM on 4/22

PURPOSE/EDUCATIONAL VALUE Students competing at FBLA State

BILL TRIP EXPENSES TO: FBLA

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 estimate: 5-10   Faculty Sponsors 2   Other Chaperones _____
          Total # of Participants (Riders) estimate: 12

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   Monica Bean   Cindy Scott
                                                                    2/19/20

Monica Bean
Signature of Faculty Sponsor   *Date*

Trip has been ~~approved~~   disapproved, reason for disapproval _____

Joseph M Clark 2/6/2020

Signature of Superintendent/Designee   *Date*
For overnight and/or out of state trips, approval of thee Superintendent and/or Board may be required by policy 09.36.

RELATED PROCEDURES: 09.36 AP.1. 09.36 AP.21. 09.36 AP.211. 09.36 AP.212   Review/Revised: 7/1/2008