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: 8/2/2021

Date of Event: 8/30/2021

Organization: TCCHS Golf

School: TCCHS

Number of Passengers:

	Hullibel	or rassengers.			
Type of Trip (Check One)					
☐ In-County Instructional		☐ In-County Athletic		☐ Other: (Explain In Detail)	
☐Out-of-County Instructional		☐ Out-of-County Athletic			
☐ Out-of-State Instructional		☑ Out-Of-State Athletic			
Destination (Event, City, and State): Clarksville, TN					
Planned Stops To and From: TBD					
Departing Location: TCCHS Date of Departure:		: 8/30/2021	Time of Departure:	1:00pm	
Returning Location: TCCHS Date of Return: 8/3		30/2021	Time of Return: 9:0	0pm	
Chaperone/s: Brad Rager; Christopher Brandon Chaperone's Phone: 270-604-0172					
Special Requests (Check One)					
□Van □Whee	□Van □Wheelchair Accessible		or Othe	er: (Explain In Detail)	
If requesting the Van, has the person driving been certified and approved to drive? Yes No (Check One)					
Person Driving Van: Click here to enter text.		Trip Requested By: Brad Rager			
Organization Responsible for Payment: N/A – the Golf team is not requesting transportation. Transportation will be provided by parents.					
Approval of Site Based Council Rep	resentative	n Q		Date	
Approval of Site Based Council Representative					
Approval of District Representative			**	Date:	
Approval of District Representative Date: Section 3 DRIVER TURN THIS FORM IN WITH TIMESHEETS					
Section 3	·				
		Odometer Start:			
Date/Time of Return:			_		
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	

POWERS AND DUTIES OF THE BOARD OF EDUCATION

Request to Place an Item on the Agenda

Name: But Reger: Christopher Brandon
Address: TCCHS
Telephone number: 270 - 265 - 2506
Name of school children attend, if applicable:
Group represented: TCCHS Golf
Check if request was submitted to: ☐ Superintendent ☐ Board Chairperson
Conferred with following administrators (names): Zet Quarles
Description of Issue: Doef ampetition put-if-state
Specific Action Requested:
Clerkertle fout-of-state) for Joly-
competition on arguet 36, 2021
Check if you are:
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