

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 Allen Co. CTC FACULTY MEMBER IN CHARGE Mrs. 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: Nissan Stadium ADDRESS 1 Titans Way Nashville, TN 37213 PHONE (615) 565-4300☒ Out of State☐ Out of County☐ Within County☐ OvernightDATE(S) OF TRIP 11/9/21 TIME YOU PLAN TO DEPART FROM SCHOOL 7:45 AM - 8:00 AMAPPROXIMATE TIME YOU PLAN TO BE BACK AT SCHOOL 2:30 PMPURPOSE/EDUCATIONAL VALUE Tour of Nissan Stadium } have a Pro Team
Talk with Titans executives } is runBILL 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 20 Faculty Sponsors 2 Other Chaperones _____
 Total # of Participants (Riders) 22

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 Mrs. Bean & Mrs. Stovall

Monica Bean

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.