

School-Related Student Trip Request Form

SCHOOL CHRISTIAN CO. HS FACULTY MEMBER(S) SPONSORING TRIP Keisha Benson, Senior counselor
 TYPE OF TRIP (CHECK ONE):

- ☐ Over 300 miles ☒ Under 300 miles ☒ Co-curricular ☐ Extracurricular
☐ Classroom Field Trip ☐ Organization/Club Trip ☐ Other (athletic, band, if applicable)

DESTINATION Western Kentucky University
 ADDRESS 1906 College Heights Blvd. Bowling Green, KY 42101
 PHONE 270-745-0111

- ☐ Out of State ☒ Out of County ☐ Within County ☐ Overnight: give name, address, phone of lodging _____
8:30 2:30

DATE(S) OF TRIP 11/17/21 DEPARTURE TIME 8am RETURN TIME 3pm

PURPOSE/EDUCATIONAL VALUE College Visit for Seniors

WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.) informative

SOURCE OF FUNDING FOR TRIP 030210406791281

AMOUNT OF STUDENT FEE: 0

tour presentation
regarding post-secondary option.

NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.

BILL TRIP EXPENSES TO: ☐ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☐ BOARD ☐ OTHER

NUMBER OF: STUDENTS 25 MALE STUDENTS 10 FEMALE STUDENTS 15

MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? ☐ NO ☒ YES (SEE PROCEDURE 09.36 AP. 212.) ☐ CERTIFICATED COMMON CARRIER; SPECIFY _____

☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) _____

CERTIFIED CHAPERONES Keisha Benson

CLASSIFIED CHAPERONES Shawna Johnson, Gabrielle Dooley

Have all chaperones undergone the required records check and b

SUBMIT THIS FORM FOUR (4) WEEKS PRIOR

supervise students? ☒ Yes ☐ No
 acceptable behavior? ☒ Yes ☐ No

Have all students been notified of the rules and regulations regarding
 How have they been notified?

Keisha Benson
 Signature of Faculty Sponsor

11/3/21
 Date

[Signature]
 Signature of Principal

11/3/21
 Date

EMERGENCY REQUESTS DUE TO UNFORSEEN CIRCUMSTANCES THAT MAKE PRIOR BOARD APPROVAL IMPOSSIBLE SHOULD ALSO HAVE THE SIGNATURE OF THE BOARD CHAIRPERSON

Trip has been ☒ approved ☐ disapproved. Reason for disapproval _____

[Signature]
 Signature of Superintendent/Designee

11-3-21
 Date

[Signature]
 Signature of Board Chair

11-3-21
 Date

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

RELATED PROCEDURES:

09.36 AP.211, 09.36 AP.212, 09.36 AP.23

Review/Revised: 11/21/13

"emergency approval"

SchoolRelated Student Trip Request Form

SCHOOL

FACULTY MEMBER(S) SPONSORING TRIP Benjamin Stephens

TYPE OF TRIP (CHECK ALL THAT APPLY):

Over 300 miles

Under 300 miles

Co curricular

Extracurricular

Classroom Field Trip

Organization/Club Trip

Other (athletic, band, if applicable)

DESTINATION Bowling Green High School ADDRESS 1801 Rockingham Ave. PHONE-DESTINATION (270) 746-2300
Bowling Green, KY 42104

Out of State

Out of County

Within County

Overnight: give name, address, phone of lodging

DATE(S) OF TRIP 11/4/21DEPARTURE TIME 2:00 PMRETURN TIME 8:00 PM

START END

(SELECT AM OR PM FROM DROPDOWN)

(SELECT AM OR PM FROM DROPDOWN)

PURPOSE/EDUCATIONAL VALUE District Vocal Performance

WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)

SOURCE OF FUNDING FOR TRIP High School DAF

NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.

BILL TRIP EXPENSES TO: SPONSORING ORGANIZATION SCHOOL COUNCIL BOARD OTHER _____

NUMBER OF: STUDENTS 18MALE STUDENTS 7FEMALE STUDENTS 11

MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? NO YES (SEE PROCEDURE 09.36 AP. 212.)

CERTIFICATED COMMON CARRIER; SPECIFY _____

PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) _____

SUBMIT THIS FORM TWO (2) WEEKS

Certified chaperones BEN STEPHENS

Classified chaperones _____

Have all chaperones undergone the required records check and been designated by the principal/designee to supervise students?

Yes No

Have all students been notified of the rules and regulations regarding acceptable behavior?

Yes No

How have they been notified? Letters home, and review of travel expectationsX

Faculty/Sponsor Signature

X

Principal Signature

Trip has been approved disapproved. Reason for disapproval _____X

Signature of Superintendent/Designee

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

School-Related Student Trip Request Form**SUBMIT THIS FORM FOUR (4) WEEKS PRIOR TO TAKING THE TRIP.**SCHOOL CHRISTIAN CO. HS FACULTY MEMBER(S) SPONSORING TRIP Paula Gieseke

TYPE OF TRIP (CHECK ONE):

- ☐ Over 300 miles ☒ Under 300 miles ☒ Cocurricular ☐ Extracurricular
☒ Classroom Field Trip ☐ Organization/Club Trip ☐ Other (athletic, band, if applicable)

DESTINATION JostensADDRESS 451 International Blvd Clarksville Ky : GardenPHONE 931-245-5800

- ☒ Out of State ☐ Out of County ☐ Within County ☐ Overnight: give name, address, phone of lodging

DATE(S) OF TRIP 12-10-21 DEPARTURE TIME 8:30 RETURN TIME 2:00PURPOSE/EDUCATIONAL VALUE Yearbook trainingWHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.) HS VA Re 9.1.111SOURCE OF FUNDING FOR TRIP YearbookConstruct + Order ContentAMOUNT OF STUDENT FEE: 0

NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.

BILL TRIP EXPENSES TO: ☒ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☐ BOARD ☐ OTHERNUMBER OF: STUDENTS 12 MALE STUDENTS 4 FEMALE STUDENTS 14MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? ☐ NO ☒ YES (SEE PROCEDURE 09.36 AP. 212.) ☐ CERTIFICATED COMMON CARRIER; SPECIFY _____☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) _____CERTIFIED CHAPERONES Paula GiesekeCLASSIFIED CHAPERONES Sonya GinnHave all chaperones undergone the required records check and been designated by the principal/designee to supervise students? ☒ Yes ☐ Noacceptable behavior? ☐ Yes ☐ No

Have all students been notified of the rules and regulations regarding

How have they been notified? Yes - Field trip formPaula Gieseke

Signature of Faculty Sponsor

10-25-21

Date

Patricia

Signature of Principal

10/25/21

Date

EMERGENCY REQUESTS DUE TO UNFORSEEN CIRCUMSTANCES THAT MAKE PRIOR BOARD APPROVAL IMPOSSIBLE SHOULD ALSO HAVE THE SIGNATURE OF THE BOARD CHAIRPERSONTrip has been ☒ approved ☐ disapproved. Reason for disapproval _____Chris Burt

Signature of Superintendent/Designee

10-27-2021

Date

Signature of Board Chair

Date

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

RELATED PROCEDURES:

09.36 AP.211, 09.36 AP.212, 09.36 AP.23

Review/Revised:11/21/13

SchoolRelated Student Trip Request Form**SUBMIT THIS FORM FOUR (4) WEEKS PRIOR TO TAKING THE TRIP.**SCHOOL: CCHS FACULTY MEMBER(S) SPONSORING TRIP: MARVIN HARNESS

TYPE OF TRIP (CHECK ONE):

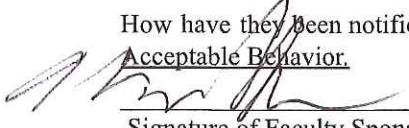
- ☐ Over 300 miles ☒ Under 300 miles ☒ Co-curricular ☐ Extracurricular
☐ Classroom Field Trip ☐ Organization/Club Trip ☐ Other (athletic, band, if applicable)

DESTINATION KENTUCKY

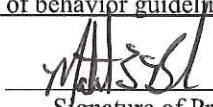
☒ Out of State ☒ Out of County ☐ Within County ☐ Overnight: give name, address, phone of lodging: Titan Stadium Nashville, TN.

DATE(S) OF TRIP TUESDAY: NOV 9, 2021DEPARTURE TIME 6:30 A.M.RETURN TIME 5:30 P.M.PURPOSE/EDUCATIONAL VALUE: INTRODUCE STUDENTS TO BEHIND THE SCENES OF THE NFL, BUSINESS/SPORTS PRACTICES, HOW A MAJOR BUSINESS FRANCHISE OPERATES, JOBS IN THE NFLWHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.) MARKETING IN SPORTS, BUSINESS PRACTICES, ENTREPRENEURSHIP OF MAJOR BUSINESS, CAREERS IN THE NFLSOURCE OF FUNDING FOR TRIP: FBLAAMOUNT OF STUDENT FEE: \$35.00

NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.

BILL TRIP EXPENSES TO: ☒ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☐ BOARD ☐ OTHERNUMBER OF: STUDENTS 100 MALE STUDENTS 50 FEMALE STUDENTS 50MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? ☐ NO ☒ YES (SEE PROCEDURE 09.36 AP. 212.)☐ CERTIFICATED COMMON CARRIER; SPECIFY ☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) CERTIFIED CHAPERONES: MARVIN HARNESS, LEEANN FERGUSONCLASSIFIED CHAPERONES Have all chaperones undergone the required records check and been designated by the principal/designee to supervise students? ☒ Yes ☐ NoHave all students been notified of the rules and regulations regarding acceptable behavior? ☒ Yes ☐ NoHow have they been notified? Student and Parent signed copy of behavior guidelines document and District Code of Acceptable Behavior.

 Signature of Faculty Sponsor

10/24/21
 Date


 Signature of Principal

10/25/21
 Date
EMERGENCY REQUESTS DUE TO UNFORSEEN CIRCUMSTANCES THAT MAKE PRIOR BOARD APPROVAL IMPOSSIBLE SHOULD ALSO HAVE THE SIGNATURE OF THE BOARD CHAIRPERSONTrip has been ☒ approved ☐ disapproved. Reason for disapproval

 Signature of Superintendent/Designee

10-27-2021
 Date

Signature of Board Chair

Date

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

RELATED PROCEDURES:

09.36 AP.211, 09.36 AP.212, 09.36 AP.23

Review/Revised:11/21/13

SchoolRelated Student Trip Request Form**SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO TAKING THE TRIP.**

SCHOOL

FACULTY MEMBER(S) SPONSORING TRIP Benjamin Stephens**TYPE OF TRIP (CHECK ALL THAT APPLY):**

- ☐ Over 300 miles ☒ Under 300 miles ☐ Co curricular ☐ Extracurricular
☐ Classroom Field Trip ☐ Organization/Club Trip ☒ Other (athletic, band, if applicable)

DESTINATION Bowling Green High School ADDRESS 1801 Rockingham Ave. PHONE-DESTINATION (270) 746-2300
Bowling Green, KY 42104

- ☐ Out of State ☒ Out of County ☐ Within County ☐ Overnight: give name, address, phone of lodging

DATE(S) OF TRIP 11/4/21

START

END

DEPARTURE TIME 2:00 PM

(SELECT AM OR PM FROM DROPDOWN)

RETURN TIME 8:00 PM

(SELECT AM OR PM FROM DROPDOWN)

PURPOSE/EDUCATIONAL VALUE District Vocal Performance

WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)

SOURCE OF FUNDING FOR TRIP High School DAF

NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.

BILL TRIP EXPENSES TO: ☒ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☐ BOARD ☐ OTHER _____NUMBER OF: STUDENTS 18MALE STUDENTS 7FEMALE STUDENTS 11MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? ☐ NO ☒ YES (SEE PROCEDURE 09.36 AP. 212.)☐ CERTIFICATED COMMON CARRIER; SPECIFY _____☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) _____Certified chaperones BEN STEPHENS

Classified chaperones _____

Have all chaperones undergone the required records check and been designated by the principal/designee to supervise students?

☒ Yes ☐ No

Have all students been notified of the rules and regulations regarding acceptable behavior?

☒ Yes ☐ NoHow have they been notified? Letters home, and review of travel expectations

X _____

Faculty/Sponsor Signature

X _____

Principal Signature

Trip has been ☒ approved ☐ disapproved. Reason for disapproval _____

X _____

Signature of Superintendent/Designee

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

School-Related Student Trip Request Form**SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO TAKING THE TRIP.**SCHOOL Christian Co. HighFACULTY MEMBER(S) SPONSORING TRIP Mr. Burnham**TYPE OF TRIP (CHECK ALL THAT APPLY):**

- ☐ Over 300 miles ☒ Under 300 miles ☐ Co curricular ☒ Extracurricular
☐ Classroom Field Trip ☐ Organization/Club Trip ☒ Other (athletic, band, if applicable)

 DESTINATION Central High School, ADDRESS 1000 South Silver Springs PHONE-DESTINATION (573) 335-8228
Road, Cape Girardeau, MO 63703

- ☒ Out of State ☐ Out of County ☐ Within County ☒ Overnight: give name, address, phone of lodging
PEAR TREE BY DRURY 3248 WILLIAM STREET.

CAPE GIRARDEAU, MO 63701 (573) 334-3000DATE(S) OF TRIP 12/17/21-12/18/21DEPARTURE TIME 11:00AMRETURN TIME 11:00 PM

START

END

(SELECT AM OR PM FROM DROPDOWN)

(SELECT AM OR PM FROM DROPDOWN)

PURPOSE/EDUCATIONAL VALUE Competition

WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)

SOURCE OF FUNDING FOR TRIP Athletics

NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.

BILL TRIP EXPENSES TO: ☐ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☒ BOARD ☐ OTHER _____NUMBER OF: STUDENTS 25 MALE STUDENTS 25 FEMALE STUDENTS 0MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? ☐ NO ☐ YES (SEE PROCEDURE 09.36 AP. 212.)☒ CERTIFICATED COMMON CARRIER; SPECIFY School bus☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) _____Certified chaperones ROBERT A. BURNHAMClassified chaperones DEE LEAVELL, ANTHONY SMITH, AND DAMIEN LEAVELL

Have all chaperones undergone the required records check and been designated by the principal/designee to supervise students?

☒ Yes ☐ No

Have all students been notified of the rules and regulations regarding acceptable behavior?

☒ Yes ☐ NoHow have they been notified? Code of Conduct signed by athletes and parent

X

Robert A. Burnham

Robert A. Burnham

Faculty/Sponsor Signature

X

[Signature]

Principal Signature

Trip has been ☒ approved ☐ disapproved. Reason for disapproval _____

X

[Signature]

Signature of Superintendent/Designee

School-Related Student Trip Request Form**SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO TAKING THE TRIP.**SCHOOL Christian Co. HighFACULTY MEMBER(S) SPONSORING TRIP Mr. Burnham**TYPE OF TRIP (CHECK ALL THAT APPLY):**

- ☐ Over 300 miles ☒ Under 300 miles ☐ Co curricular ☒ Extracurricular
☐ Classroom Field Trip ☐ Organization/Club Trip ☒ Other (athletic, band, if applicable)

DESTINATION Father Ryan High School ADDRESS 700 Norwood Drive, Nashville, TN 37204 PHONE-DESTINATION 615-4184715

- ☐ Out of State ☐ Out of County ☐ Within County ☒ Overnight: give name, address, phone of lodging
RED ROOF INN NASHVILLE FAIRGROUNDS

4271 SIDCO DRIVE NASHVILLE, TN (615) 832-0093DATE(S) OF TRIP 1/7/2022-1/8/2022DEPARTURE TIME 10:00^{AM}PM
(SELECT AM OR PM FROM DROPDOWN)RETURN TIME 12:00 AM
(SELECT AM OR PM FROM DROPDOWN)PURPOSE/EDUCATIONAL VALUE competitionWHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)
_____SOURCE OF FUNDING FOR TRIP lkjdkdjk

NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.

BILL TRIP EXPENSES TO: ☐ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☒ BOARD ☐ OTHER _____NUMBER OF: STUDENTS 15 MALE STUDENTS 15 FEMALE STUDENTS 0MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? ☐ NO ☒ YES (SEE PROCEDURE 09.36 AP. 212.)☒ CERTIFICATED COMMON CARRIER; SPECIFY school bus☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) _____Certified chaperones ROBERT A. BURNHAMClassified chaperones ANTHONY HARRIS, DECOREUS LEAVELL, AND DAMIEN LEAVELL

Have all chaperones undergone the required records check and been designated by the principal/designee to supervise students?
☒ Yes ☐ No

Have all students been notified of the rules and regulations regarding acceptable behavior? ☒ Yes ☐ No

How have they been notified? Code of Conduct signed by athletes and parentsX Robert A. BurnhamRobert A. Burnham
Faculty/Sponsor SignatureX

Principal Signature

Trip has been ☒ approved ☐ disapproved. Reason for disapproval _____X

Signature of Superintendent/Designee

School-Related Student Trip Request Form**SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO TAKING THE TRIP.**SCHOOL Christian Co. HighFACULTY MEMBER(S) SPONSORING TRIP Robert A. Burnham**TYPE OF TRIP (CHECK ALL THAT APPLY):**

- ☐ Over 300 miles ☒ Under 300 miles ☐ Co curricular ☒ Extracurricular
☐ Classroom Field Trip ☐ Organization/Club Trip ☒ Other (athletic, band, if applicable)

DESTINATION Anderson County High School ADDRESS 750 W Broadway St, Lawrenceburg, KY 40342 PHONE-DESTINATION (502) 839-5118

- ☐ Out of State ☒ Out of County ☐ Within County ☒ Overnight: give name, address, phone of lodging
BEST WESTERN LAWRENCEBURG INN, 200 PLAZA

DR, LAWRENCEBURG, KY 40342, +15028393444DATE(S) OF TRIP 01/28/22-01/29/22DEPARTURE TIME 6:00 PMRETURN TIME 11:00 PM

START END

(SELECT AM OR PM FROM DROPDOWN)

(SELECT AM OR PM FROM DROPDOWN)

PURPOSE/EDUCATIONAL VALUE _____

WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)
_____SOURCE OF FUNDING FOR TRIP lkjdkdjk

NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.

BILL TRIP EXPENSES TO: ☐ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☒ BOARD ☐ OTHER _____NUMBER OF: STUDENTS 20 MALE STUDENTS 20 FEMALE STUDENTS _____MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? ☐ NO ☒ YES (SEE PROCEDURE 09.36 AP. 212.)☒ CERTIFICATED COMMON CARRIER; SPECIFY fkjdskjs☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) _____Certified chaperones ROBERT A. BURNHAMClassified chaperones ANTHONY SMITH, DECOREUS LEAVELL, LIVINGSTON MERRITT

Have all chaperones undergone the required records check and been designated by the principal/designee to supervise students?
☒ Yes ☐ No

Have all students been notified of the rules and regulations regarding acceptable behavior? ☒ Yes ☐ No

How have they been notified? Code of Conduct signed by athletes and parentX Robert A. BurnhamRobert A. Burnham
Faculty/Sponsor SignatureX [Signature]

Principal Signature

Trip has been ☒ approved ☐ disapproved. Reason for disapproval _____

X

Signature of Superintendent/Designee

School-Related Student Trip Request Form**SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO TAKING THE TRIP.**SCHOOL Christian Co. HighFACULTY MEMBER(S) SPONSORING TRIP Mr. Burnham**TYPE OF TRIP (CHECK ALL THAT APPLY):**

- ☐ Over 300 miles ☒ Under 300 miles ☐ Co curricular ☒ Extracurricular
☐ Classroom Field Trip ☐ Organization/Club Trip ☒ Other (athletic, band, if applicable)

DESTINATION TBA SchoolADDRESS TBAPHONE-DESTINATION TBA

- ☐ Out of State ☐ Out of County ☐ Within County ☒ Overnight: give name, address, phone of lodging
TBA

DATE(S) OF TRIP 2/18/2022-2/19/2022DEPARTURE TIME 3:00PMRETURN TIME 11:00 PM

START

END

(SELECT AM OR PM FROM DROPDOWN)

(SELECT AM OR PM FROM DROPDOWN)

PURPOSE/EDUCATIONAL VALUE Competition

WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)

SOURCE OF FUNDING FOR TRIP lkjdkdjkjs

NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.

BILL TRIP EXPENSES TO: ☐ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☒ BOARD ☐ OTHER _____NUMBER OF: STUDENTS 18MALE STUDENTS 18FEMALE STUDENTS 0MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? ☐ NO ☐ YES (SEE PROCEDURE 09.36 AP. 212.)☐ CERTIFICATED COMMON CARRIER; SPECIFY School Bus☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) _____Certified chaperones ROBERT A. BURNHAMClassified chaperones DECOREUS LEAVELL, ANTHONY HARRIS, DAMIEN LEAVELL, & ANTHONY SMITH

Have all chaperones undergone the required records check and been designated by the principal/designee to supervise students?

☒ Yes ☐ No

Have all students been notified of the rules and regulations regarding acceptable behavior?

☒ Yes ☐ NoHow have they been notified? Code of Conduct signed by athletes and parent.

X

Robert A. Burnham

Robert A. Burnham

Faculty/Sponsor Signature

X

[Signature]

Principal Signature

Trip has been ☒ approved ☐ disapproved. Reason for disapproval _____

X

[Signature]

Signature of Superintendent/Designee

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

School-Related Student Trip Request Form**SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO TAKING THE TRIP.**SCHOOL Christian Co. HighFACULTY MEMBER(S) SPONSORING TRIP Robert A. Burnham**TYPE OF TRIP (CHECK ALL THAT APPLY):**

- ☐ Over 300 miles ☒ Under 300 miles ☐ Co curricular ☒ Extracurricular
☐ Classroom Field Trip ☐ Organization/Club Trip ☒ Other (athletic, band, if applicable)

 DESTINATION Winchester, Kentucky ADDRESS George Rogers Clark High School, 2745 Boonesboro Rd PHONE-DESTINATION (859) 744-6111

- ☐ Out of State ☒ Out of County ☐ Within County ☒ Overnight: give name, address, phone of lodging
LA QUINTA INN & SUITES BY WYNDHAM LEXINGTON
SOUTH / HAMBURG, 100 CANEBRAKE DRIVE, LEXINGTON, KY 40509, (859) 543-1877

DATE(S) OF TRIP 02/25/2022-02/26/202DEPARTURE TIME 600 AMRETURN TIME 11:00 PM

START END

(SELECT AM OR PM FROM DROPDOWN)

(SELECT AM OR PM FROM DROPDOWN)

PURPOSE/EDUCATIONAL VALUE _____

WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)
_____SOURCE OF FUNDING FOR TRIP lkjdkdiks

NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.

BILL TRIP EXPENSES TO: ☐ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☒ BOARD ☐ OTHER _____NUMBER OF: STUDENTS 20 MALE STUDENTS 20 FEMALE STUDENTS _____MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? ☐ NO ☒ YES (SEE PROCEDURE 09.36 AP. 212.)☒ CERTIFICATED COMMON CARRIER; SPECIFY fkjdjskjs☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) _____Certified chaperones ROBERT A. BURNHAMClassified chaperones ANTHONY SMITH, DECOREUS LEAVELL, DAMIEN LEAVELL, LIVINGSTON MERRITTHave all chaperones undergone the required records check and been designated by the principal/designee to supervise students?
☒ Yes ☐ NoHave all students been notified of the rules and regulations regarding acceptable behavior? ☒ Yes ☐ NoHow have they been notified? Code of Conduct signed by athletes and parentX Robert A. Burnham

Faculty/Sponsor Signature

X Matthew S. Bell

Principal Signature

Trip has been ☒ approved ☐ disapproved. Reason for disapproval _____

X

Signature of Superintendent/Designee