SCHOOL <u>CHRISTIAN CO. HS</u> FACULTY MEMBER(S) SPONS TYPE OF TRIP (CHECK ONE):	ORING TRIP KEISHA BENSON - SENIOR COUNSELOR
□ Over 300 miles □ Under 300 miles □ C	ocurricular
□ Classroom Field Trip □ Organization/Club Trip □ O	ther (athletic, band, if applicable
DESTINATION MURRAY STATE UNIVERSITY	`
ADDRESS 102 CURRIS CENTER, MURRAY, KY 42071	
PHONE <u>270-809-3002</u>	
□ Out of State □ Out of County □ Within Cou	nty    Overnight: give name, address, phone of
lodging	
DATE(S) OF TRIP JANUARY 24, 2022 DEPARTURE TIME 8:30AM	RETURN TIME 2:30PM
PURPOSE/EDUCATIONAL VALUE	
WHAT STANDARD IS BEING ADDRESSED BY TAKING THI INFORMATIVE TOUR/ PRESENTATION POST-SECONDARY OPTI	
SOURCE OF FUNDING FOR TRIP 03021040679128I	
AMOUNT OF STUDENT FEE: <u>\$0</u>	
NO STUDENT SHALL BE DENIED THE TRIP I	BECAUSE OF AN INABILITY TO PAY.
BILL TRIP EXPENSES TO: $\square$ SPONSORING ORGANIZATION	$\square$ SCHOOL COUNCIL $\square$ BOARD $\square$ OTHER
NUMBER OF: STUDENTS <u>15</u> MALE STUDENTS <u>7</u>	FEMALE STUDENTS 8
MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION 212.) □ CERTIFICATED COMMON CARRIER; SPECIFY	NEEDED? □ NO □ YES (SEE PROCEDURE 09.36 AP.
□ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SP	ECIFY DRIVER(S)
CERTIFIED CHAPERONES KEISHA BENSON	
	SUBMIT THIS FORM FOUR (4) WEE
CLASSIFIED CHAPERONES SHAWNA JOHNSON, GABRIELLE DO	OLEY
Have all chaperones undergone the required records check	and been designated by the principal/designee to
□	s been notified of the rules and regulations regarding
· · · · · · · · · · · · · · · · · · ·	they been notified? Code of acceptable behavior,
informational meeting	de la
a	11. /24
Keisha Benson 01/10/2022	- TIMES & 1/10/24
Signature of Faculty Sponsor Date	Signature of Principal Date
EMERGENCY REQUESTS DUE TO UNFORSEEN CLAPPROVAL IMPOSSIBLE SHOULD ALSO HAVE THE	
Trip has been approved	
Pl Com	11111
/ Com only	FIREU
Signature of Superintendent/Designee	Date
Signature of Board Chair	Date
For overnight and/or out-of-state trips, approval of the Superin	endem 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

SUBMIT THIS FORM FOUR (4) WEEKS PRIOR TO TAKING THE TRIP.	
SCHOOL: CHRISTIAN CO. HS FACULTY MEMBER(S) SPONSORING TR	ир: <u>V. Монон</u>
Type of Trip (check one):	
□ Over 300 miles Under 300 miles □ Cocurricular Extracurr □ Classroom Field Trip □ Organization/Club Trip □ Other (athletic, band, if applicable	ricular
DESTINATION: KENTUCKY FAIR & EXPO CENTER ADDRESS: 937 PHILLIPS LN., LOUIS	SVILLE, KY
Phone: 270-839-2948	
□ Out of State Yo Out of County □ Within County □ Overnight: give name, address, p	hone of lodging
Out of State A Out of County   Within County   Overlingth, give many, many,	00
DATE(S) OF TRIP: 2-17-22 DEPARTURE TIME: 7:00 A.M. RETURN TIME: 6:00 PM	
PURPOSE/EDUCATIONAL VALUE: STUDENTS SEE THE LATEST EQUIPMENT AND ARE REWARDED FOR FFA	EFFORTS IN FFA
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)	
SS-AA007 DEMONSTRATE UNDERSTANDING OF BASIC INTERPERSONAL COMMUNICATION (LISTENING, WR.	ITTEN, ORAL, ETC)
Source of funding for trip: CCHS FFA	
AMOUNT OF STUDENT FEE: <u>\$0</u>	
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: 13 Female Students: 12	
Mode of Transportation: is district transportation needed? □ no → Y yes (see procedure of transportation)	09.36 AP. 212.)
□ Certificated common carrier; specify	bus request
□ Private vehicle, if allowed by policy; specify driver(s)	submitted
CERTIFIED CHAPERONES VICTORIA MOHON	
Classified chaperones None	
Have all chaperones undergone the required records check and been designated by the pri supervise students?	ncipal/designee to Yes □ No
Have all students been notified of the rules and regulations regarding acceptable behavior?	Yes 🗆 No
How have they been notified? <u>Permission Slip, Code of Acceptable Behavior</u>	
41 4	
	to 1
Victoria unonon 12/30/21 /al/SS/	1/-1/22
Signature of Faculty Sponsor Date Signature of Principal	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 papproved disapproved. Reason for disapproval	
1-5-	2022
Signature of Superintendent/Designee Date	e
Signature of Board Chair Date	N//
For overnight and/or out-of-state trips, approval of the Superintendent and/or Board may be required by	by policy 09.36.
For overnight and/or out-of-state trips, approval of the Superintendent and/or Board may be required by	by policy 09.36.

RELATED PROCEDURES:

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

	SUBMIT THIS FORM FOUR (4	WEEKS PRIOR TO TAKING TH	E TRIP.	
SCHOOL: <u>CHRISTIAN CO. H.</u> TYPE OF TRIP (CHECK ONE):	S FACULTY M	LEMBER(S) SPONSORING TRIP:	V. Mohon	
<ul><li>□ Over 300 miles</li><li>□ Classroom Field Trip</li></ul>	Under 300 miles Organization/Club Trip	<ul><li>□ Cocurricular</li><li>□ Other (athletic, band, if a</li></ul>	X Extracurricular applicable	
	CKY UNIVERSITY ADDRESS: 190	06 COLLEGE HEIGHTS BLVD #41	1066, Bowling Green,	KY 42101
PHONE: <u>270-745-3151</u>	C.C Within Cour	oty = Overnight: give nam	ne address nhone o	flodging
□ Out of State 17 Out of	of County   Within Cour	nty   Overnight: give nam	ie, address, phone o	. Iouging
DATE(S) OF TRIP: 4-13-22	Departure Time: 7:	00 A.M. RETURN TIME	е: <u>5:00 рм</u>	
Purpose/Educational Valu	JE: STUDENTS WILL COMPETE	E IN LEADERSHIP AND CAREER D	EVELOPMENT EVENT CO	ONTESTS
What standard is being adi	DRESSED BY TAKING THIS TRIP	? (Does not apply to athle:	TIC TRIPS.)	
SS-AA007 demonstrate un	NDERSTANDING OF BASIC INTER	RPERSONAL COMMUNICATION (I	LISTENING, WRITTEN, O	RAL, ETC)
Source of funding for trip	: CCHS FFA			
AMOUNT OF STUDENT F	FEE: <b>\$0</b>			
No sa	TUDENT SHALL BE DENIED THE	TRIP BECAUSE OF AN INABILIT	Y TO PAY.	
BILL TRIP EXPENSES TO: X SPO	ONSORING ORGANIZATION	□ SCHOOL COUNCIL	□ BOARD □	OTHER
Number of: students 4	MALE STUDENTS:	3 Female Stu	udents: 1	
Mode of Transportation:	RRIER; SPECIFY	NEEDED? □ NO YES (SEI	2011	101 4
□ Private vehicle, if allow	WED BY POLICY; SPECIFY DRIV	ER(S)	requ	cstea
CERTIFIED CHAPERONES VICT	TORIA MOHON			
CLASSIFIED CHAPERONES NO	<u>NE</u>			
supervise students?		s check and been designate	X	esignee to Yes □ No Yes □ No
How have they been notified	d? Permission Slip, Code	gulations regarding acceptable of Acceptable Behavior	ne benavior:	103 1110
Signature of Faculty Spons	12 30 21 sor Date	Signature of Prin		1/22 Inte
EMERGENCY REQUES	STS DUE TO UNFORSE	EN CIRCUMSTANCES TO THE SIGNATURE OF TO	HAT MAKE PRIO	R BOARD PERSON
Trip has been approved	□ disapproved. Reason for disap	pproval		
/ Van	in Rmov		1-5-22	
Signature of Superi	ntendent/Designee		Date	· · · · · · · ·
Signature of Board		7) March 25-70 State	Date	
For overnight and/or ou	t-of-state trips, approval of the	Superintendent and/or Board ma	ay be required by policy	09.36.

RELATED PROCEDURES:

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

		SUBMIT THIS F	ORM FOUR (4	WEEKS PRIOR TO TAKIN	NG THE TRIP.	
	HRISTIAN Co. H	<u>s</u>	FACULTY M	ember(s) sponsoring t	RIP: V. MOHON	& J. Jaworski
	P (CHECK ONE):		27K		15.	
□ Over 300 □ Classroo	0 miles om Field Trip	Under 300 in Organization	n/Club Trip	☐ Cocurricular☐ Other (athletic, band	d, if applicable	
DESTINATION	: Murray State		A	DDRESS: 102 CURRIS C	enter, Murray,	KY 42071
PHONE: 800	-272-4678				enter está	
□ Out of	State X Out o	of County 🗆 🕽	Within Coun	ty   Overnight: give	name, address,	, phone of lodging
	Trip: 3-4-22		ure Time: <u>7:0</u>		Тіме: <u>5:00 рм</u>	
				IN LEADERSHIP AND CAR		T EVENT CONTESTS
WHAT STAND	ARD IS BEING AD	DRESSED BY TAK	ING THIS TRIP	(Does not apply to a	THLETIC TRIPS.)	
SS-AA007	DEMONSTRATE U	NDERSTANDING O	F BASIC INTER	PERSONAL COMMUNICAT	ION (LISTENING, W	<u>/RITTEN, ORAL, ETC)</u>
Source of F	UNDING FOR TRIE	: CCHS FFA				
AMOUNT (	OF STUDENT I	FEE: <u><b>\$0</b></u>				
	No s	TUDENT SHALL B	E DENIED THE	TRIP BECAUSE OF AN INA	BILITY TO PAY.	
BILL TRIP EX	PENSES TO: X SP	ONSORING ORGA	NIZATION	□ SCHOOL COUNC	IL 🗆 BOAR	RD   OTHER
Number of:	STUDENTS 30	MAL	e Students:		E STUDENTS: <u>15</u>	
- CERTIFICA	TED COMMON CA	RRIER: SPECIFY		NEEDED? □ NO X YE		_ bus request
$\Box$ Private v	EHICLE, IF ALLO	WED BY POLICY;	SPECIFY DRIVI	er(s)	- 100 m	1 010111111CM
CERTIFIED C	CHAPERONES VIC	TORIA MOHON,	JACOB JAWOR	<u>ski</u>		
CLASSIFIED	CHAPERONES <u>No</u>	<u>NE</u>				
supervise st	udents?			check and been desi		M res □ No
Have all so How have t	tudents been no hey been notifie	otified of the and of	rules and regon Slip, Code	ulations regarding acc of Acceptable Behavio	ceptable behavio or	r? Yes □ No
EMERGE.	of Faculty Spons	sor STS DUE TO	L 35 21 Date UNFORSEI	Signature o	ES THAT MAK	1/4/21 Date XE PRIOR BOARD
APPROVA	L IMPOSSIBI	LE SHOULD A	ALSO HAVE	THE SIGNATURE C	OF THE BOARI	D CHAIRPERSON
Trip has been	n papproved	□ disapproved. R	eason for disag	oprovai		
Si	gnature of Super	intendent/Design	iee			5 - 2822 Date
Si	gnature of Board	Chair				Date
For ov	vernight and/or ou	ıt-of-state trips, a	pproval of the	Superintendent and/or Bo	ard may be require	d by policy 09.36.

RELATED PROCEDURES:

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

SCHOOLCHRISTIAN CO. HS FACULTY MEMBER(S) SPONSORING TRIP
TYPE OF TRIP (CHECK ONE):
Over 300 miles
Classroom Field Trip Organization/Club Trip Other (athletic, band, if applicable
DESTINATION Clarks ville TN
ADDRESS
PHONE
Out of State Out of County Within County Overnight: give name, address, phone of
lodging
DATE(S) OF TRIP Join 19/22 DEPARTURE TIME 0 2 RETURN TIME 2.30 PM
PURPOSE/EDUCATIONAL VALUE HIS RUNK AWAYNESS WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.) 1. 5 SOURCE OF FUNDING FOR TRIP WORLD KENGLAGE CLAS AND ACCOUNT:
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)
SOURCE OF FUNDING FOR TRIP WOIT OF FUNDING COUNTS
AMOUNT OF STUDENT FEE:
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 FEMALE STUDENTS
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
Jackie Williams Robert Cruz
CLASSIFIED CHAPERONES
SUBMIT THIS FORM FOUR (4) WEEK
Have all chaperones undergone the required records check and bl
supervise students? Yes No Have all students been notified of the rules and regulations regarding acceptable behavior? Yes No How have they been notified?
acceptable behavior? Yes No How have they been notified.
Robert Croc Jackie Williams 12/17/21 Mat & 12/17/21
Signature of Faculty Sponsor Date Signature of Principal 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
(12-17-202)
Signature of Superintendent Designee Date
Tom Bell "Kne"
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



,	SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO TAKING THE TRIP.			
SCHOOL Grafery	FA	ACULTY MEMBER(S) SPONSORING TRIP	- Dylan S	elly
Type of Trip (check ALL	THAT APPLY):		/	
Over 300 miles	Under 300 miles	☐ Co curricular	Extracurricul	ar
☐ Classroom Field Trip	Organiza	ation/Club Trip	athletic, band, if appli	cable)
DESTINATION	Addre	ss 1600 Dixle Hy, 17,11s, Ky I	PHONE-DESTINATION	859-491-2297
☐ Out of State 🖾 Qu	it of County	Within County Novernight: g	give name, address, pl	hone of lodging Sites
		10 County Dr.	Wilder, Ky, 8	59-441-3707
DATE(S) OF TRIP \[ \frac{1}{2} \]	28-1/29	DEPARTURE TIME 3:30		
VENTONIA CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CO	5000000	(SELECT AM OR PM) FROM DROPDOWN)	(SELECT AM OR PM	JFROM DROPDOWN)
Purpose/Educational Val				Covin
WHAT STANDARD IS BEING AD	DRESSED BY TAKING	THIS TRIP? (DOES NOT APPLY TO ATH	LETIC TRIPS.)	8592
Source of funding for tri	P-VEX	Robotics		
	No student shall	BE DENIED THE TRIP BECAUSE OF AN		
•		ZATION SCHOOL COUNCIL BO		
		rudents 20 Female S		
Mode of Transportation:	IS DISTRICT TRAI	NSPORTATION NEEDED? ☐ NO	X YES (SEE PROCEDUR	E 09.36 AP. 212.)
☐ CERTIFICATED C	OMMON CARRIER; SP	ECIFY		
		DLICY; SPECIFY DRIVER(S)		
Certified chaperones	Dulan Sel	ly		
Certified chaperones Dylan Sully  Classified chaperones Robert Lee  Leve all chaperones undergone the required records check and been designated by the principal/designee to supervise students?				
have all chaperones undergone the required records check and occur designated by the principal designed to supervise statement.				
Have all students been notified of the rules and regulations regarding acceptable behavior?				
Trave an students seen notified of the rules and regarding weeps				
How have they been notified? Written agreement				
X Oylan Caley X Penny Knight				
Faculty/Sponsor Signature	9	Principal Signature		
Trip has been approved	disapproved. Reason	for disapproval		
Signature of Su				
For overnight and/or out-of-state	trips, approval of the Su	perintendent and/or Board may be required I	by policy 09.36.	2 S S S S S S S S S S S S S S S S S S S

UHS BOYS	BASESOLL	The second secon
SCHOOL TYPE OF TRIP	SUBMIT THIS FORM FOUR (4) WEEKS PRIOR TO T	AKING THE TRIP.
	KY ADDRESS TETO CENTURY MILKOR PHO	NE(502)-140-4171
lodging FAIRFIEL	Jut of County Within County Dove	- EASTERN H.S.
DATE(S) OF TRIP IZET - IZ		URN TIME TEO
PURPOSE/EDUCATIONAL VA		The state of the s
WHAT STANDARD IS BEIN	NG ADDRESSED BY TAKING THIS TRIP? (DOES	NOT APPLY TO ATHLETIC TRIPS.
SOURCE OF FUNDING FOR T	RIP	
AMOUNT OF STUDENT FEE:		
NO STUD	DENT SHALL BE DENIED THE TRIP BECAUSE OF AN	INABILITY TO PAY.
BILL TRIP EXPENSES TO: Q	SPONSORING ORGANIZATION DSCHOOL CO	
NUMBER OF: STUDENTS 1		ALE STUDENTS
212.) ECERTIFICATED (	COMMON CARRIER; SPECIFY 503	NO THE (SEE PROCEDURE 09.36 AP
☐ PRIVATE VEI	licle, if allowed by policy; specify driver(	S)
CERTIFIED CHAPERONES _	JORDAN MAJORS - ASST. COALN	
	rgone the required records check and been ded I No Have all students been notified. How have they been notified?	signated by the principal/designee to
MUNIC	12621 /1 3	12/15/21
Signature of Faculty Spons		of Principal Date
EMERGENCY REQUEST APPROVAL IMPOSSIBLE	S DUE TO UNFORSEEN CIRCUMSTANCE SHOULD ALSO HAVE THE SIGNATURE OF	ES THAT MAKE PRIOR BOARD THE BOARD CHAIRPERSON
Trip has been approved D	disapproved. Reason for disapproval	
	LWY .	12-15-254
Signature of Superin		Date
TomBREE		13-15-21
Signature of Board		Date
For overnight and/or out	of state trips, approval of the Superintendent and/or Bo	ard may be required by policy 09.36.
RELATED PROCEDURES:		
09.36 AP.211, 09.3	36 AP.212, 09.36 AP.23	
		Review/Revised:11/21/13
or age of the second	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	