Day Trip

School-Related Student Trip Request Form

GCMC	SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO THE TRIP.	
SCHOOL SCMS FACULTY MEMBER(S)	SPONSORING TRIP REDECCO NINEN	
TYPE OF TRIP (CHECK ONE):		
☐ Classroom Field Trip ☐ Class Trip (i.e., junior, senior),	specify	
Organization/Club Trip, specify	Other (athletic, band, if applicable)	
tim/8th grade bands	1815 South, KY-1793 Boshen, KY 4008 6 PHONE (502) 228-0158	
DESTINATION NOTTH Oldham ADDRESS	305hen, KY 4002 to PHONE (502) 228-0158	
☐ Out of State 🕱 Out of County ☐ Within County	•	
Overnight: give name, address, phone of lodging		
DATE(S) OF TRIP 03/17/22 DEPARTURE	TIME 9AM RETURN TIME	
PURPOSE/EDUCATIONAL VALUE Kentucky N	lusic Educators Association	
assessment of large groups'		
SOURCE OF FUNDING FOR TRIP School Bay	nd Account (SCMS)	
NO STUDENT SHALL BE DENIED THE TRIP I	BECAUSE OF AN INABILITY TO PAY.	
BILL TRIP EXPENSES TO:		
☐ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL	□ BOARD □ OTHER, SPECIFY	
NUMBER OF STUDENTS 88 FACULTY SPONSORS	S Q OTHER CHAPERONES 4	
TOTAL # OF PARTICIPANTS 94		
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; SI	PECIFY DRIVER(S)	
SUPERVISION (Attach list of names of adults accompanying students on trip.)		
Have all chaperones undergone the required record		
4 4 4 4 5		
principal/fesignee to supervise students?		
Lebessa Oun	a/10/22	
Signature of Faculty Sponsor		
Lebessa Oun	a/10/22	
Signature of Faculty Sponsor Trip has been approved disapproved. Reason for disapproval	a/10/22	
Signature of Faculty Sponsor Trip has been approved disapproved. Reason for disapproval Signature of Superintendent/Designee	2/10/22 Date	
Signature of Faculty Sponsor Trip has been approved disapproved. Reason for disapproval Signature of Superintendent/Designee For overnight and/or out-of-state trips, approval of the superintendent and	2/10/22 Date	
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