School-Related Student Trip Request Form

SUBMIT THIS FORM FOUR (4) WEEKS PRIOR TO TAKING THE TRIP.

SCHOOL: <u>CCPS ELEM. MS & HS STUDENTS</u> FACULTY MEMBER(S) SPONSORING TRIP: <u>FELICIA CHAPMAN / JASON WILSON</u>
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: Rupp Arena Address: 432 W. vine St. Lexington KY 40507 Phone: 859.233.4567
☐ Out of State ☐ Out of County ☐ Within County ☐ Overnight: give name, address, phone of lodging
DATE(S) OF TRIP: APRIL 20, 2022 DEPARTURE TIME: 5:00 AM RETURN TIME: 10:00PM
PURPOSE/EDUCATIONAL VALUE: TO ATTEND STLP STATE COMPETITION IN LEXINGTON, KY @ RUPP AREA. TO
ALLOW STUDENTS TO COMPETE IN THE STATE COMPETITION FOR STLP.
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.) <u>TO UTILIZE ACTIVITIES OF STLP AS AN INTEGRAL COMPONENT OF COURSE AND LEADERSHIP IN TECHNOLOGY.</u>
SOURCE OF FUNDING FOR TRIP: <u>DISTRICT</u>
AMOUNT OF STUDENT FEE: n/a
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.
Number of: students: 32 Male Students: 15 Female Students: 17
Mode of Transportation: is district transportation needed? \square no \square yes (see procedure 09.36 ap. 212.) \square Certificated common carrier; specify
□ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)
CERTIFIED CHAPERONES APPROXIMATELY 8 CERTIFIED PERSONNEL, REPRESENTING 4 DIFFERENT CCPS SCHOOLS.
CLASSIFIED CHAPERONES APPROXIMATELY 1 CLASSIFIED PERSONNEL, REPRESENTING 1 CCPS SCHOOL
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 how have they been notified? Local School Yes No How have they been notified? Local School Grant 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
Clansatul 4-4-2012
Signature of Superintendent/Designee Date
Tron Bell 11 Kness
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

School-Related Student Trip Request Form

SUBMIT THIS FORM FOUR (4) WEEKS PRIOR TO TAKING THE TRIP.	
CHOOL CHRISTIAN CO. HS FACULTY MEMBER(S) SPONSORING TRIP MS CYPE OF TRIP (CHECK ONE):	
O Over 300 miles Under 300 miles O Cocurricular Extracurricular O Classroom Field Trip O Organization/Club Trip O Other (athletic, band, if applicable	
ESTINATION Jeffer's Bend Environmental Center	
DDRESS_ 950 Metcalfe Lane Hopkinsville Ky 42240	
HONE 270 - 885 - 5600 / 270 887 -3682	
O Out of State O Out of County	of -
ATE(S) OF TRIP 01-22-22 DEPARTURE TIME 8:00 RETURN TIME 3:20	
urpose/Educational Value Painting Community Mugal at Jeffers Beno	1
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)	
OURCE OF FUNDING FOR TRIP	
MOUNT OF STUDENT FEE:	
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.	
ILL TRIP EXPENSES TO: OSPONSORING ORGANIZATION OSCHOOL COUNCIL OBOARD OOTHER	ł
Sumber of: students 30 Male Students 15 Female Students 15	
TODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? O NO O YES (SEE PROCEDURE 09	36
P. 212.)O CERTIFICATED COMMON CARRIER; SPECIFY	
O PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)	
CERTIFIED CHAPERONES Paula Gieseke	
CLASSIFIED CHAPERONES Monica Holloway	a G
lave all chaperones undergone the required records check and been designated by the principal/designee to supervitudents? Yes O No Have all students been notified of the rules and regulations regarding the principal of the rules and regulations regarding the rules and regulations regulations regarding the rules and regulations regarding the rules and regulations regarding the rules and regula	se ng howic
Signature of Faculty Sponsor Date Signature of Principal Date	
MERGENCY REQUESTS DUE TO UNFORSEEN CIRCUMSTANCES THAT MAKE PRIOR BOAR APPROVAL IMPOSSIBLE SHOULD ALSO HAVE THE SIGNATURE OF THE BOARD CHAIRPERSO	
rip has been approved O disapproved. Reason for disapproval	
Man Romy 3-29.2022	à
Signature of Superintendent/Designee Date	_
Tom & 122 "Kne" 3-29-32	
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

smergerey approved

School-Related Student Trip Request Form

CCHS SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO TAKING THE TRIP.
SCHOOL* Christian County Faculty Member(s) SPONSORING TRIP Robert Cruz Type of TRIP (CHECK ALL THAT APPLY): High School Tackie Willia
TYPE OF TRIP (CHECK ALL THAT APPLY): High School Jackie Willia
☐ Over 300 miles ☐ Under 300 miles ☐ Co curricular ☐ Extracurricular
Classroom Field Trip Organization/Club Trip Other (athletic, band, if applicable)
DESTINATION_PLAZA_MAIALBBRESS PHONE-DESTINATION
Out of State Out of County Within County Overnight: give name, address, phone of lodging
DATE(S) OF TRIP April, 22, 22 DEPARTURE TIME 8 * 05 RETURN TIME 3 * 15 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.)
PURPOSE/EDUCATIONAL VALUE WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.) SOURCE OF FUNDING FOR TRIP SAF World Language Club. NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.
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
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?
X TE CONSTANT X MANS SEL
Faculty/Sponsor Signature Principal Signature
Trip has been approved disapproved. Reason for disapproval
Christants 3-29-22
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 County High FACULTY MEMBER(S) SPONSORING TRIP KI'KI ROLL FORCE
☐ Over 300 miles ☐ Under 300 miles ☐ Cocurricular ☐ Extracurricular ☐ Classroom Field Trip ☐ Organization/Club Trip ☐ Other (athletic, band, if applicable
DESTINATION Bethel University Address 325 Cherry Avery Phone (231) 697-1284 Dout of State Out of County Within County Overnight: give name, address, phone of lodging Bethel University Student Porros
DATE(S) OF TRIP, June 12-14,200 DEPARTURE TIME 3:00pm RETURN TIME 11:00pm
PURPOSE/EDUCATIONAL VALUE Student Bosketball Team Camp
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)
Source of funding for Trip
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 12 MALE STUDENTS 0 FEMALE STUDENTS 12
MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? DNO DYES (SEE PROCEDURE 09.36 AP. 212.) CERTIFICATED COMMON CARRIER; SPECIFY
PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) CERTIFIED CHAPERONES KiKi Radford, Ecica Gordian, David Brown
CLASSIFIED CHAPERONES QShley Smith
Have all chaperones undergone the required records check and been designated by the principal/designee to supervise students? Described No Have all students been notified of the rules and regulations regarding how have they been notified? Player Signed Expectation Form 3/3/3/32
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
7/m/2/m/
Signature of Superintendent/Designee 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

SchoolRelated Student Trip Request Form

	SUBMIT THIS FORM	two (2) weeks prior to tak	NG THE TRIP.	
School	FACUL	ry Member(s) sponsoring ti	up Benjamin Stephens	
Type of Trip (check ALL ?	ΓHAT APPLY):			
☐ Over 300 miles	Under 300 miles	□ Co curricul	ar	
☐ Classroom Field Trip	☐ Organization	Club Trip 🛮 Other	(athletic, band, if applicabl	le)
DESTINATION Western Ky Ur	niversity Address		PHONE-DESTINATION	_
☐ Out of State ☐ Ou	t of County	nin County	: give name, address, phone	e of lodging
Date(s) of Trip <u>4/12/22</u>	DE	PARTURE TIME 9:00 AM	RETURN TIME 3:30 PM	
START	END (S	SELECT AM OR PM FROM DROPDOWN)	(SELECT AM OR PM FRO	M Dropdown)
Purpose/Educational Value	UE District Vocal Assess	ment Performance		
WHAT STANDARD IS BEING AD	DRESSED BY TAKING THIS	TRIP? (DOES NOT APPLY TO A	THLETIC TRIPS.)	
	m 1 111 1, 110 01	' DIC		
Source of funding for trii				
		ENIED THE TRIP BECAUSE OF A		
		ON SCHOOL COUNCIL		
Number of: students 85	MALE STUDE		E STUDENTS 60	26 212 \
		PORTATION NEEDED? NO	YES (SEE PROCEDURE U9.	.30 AP. 212.)
	OMMON CARRIER; SPECIF			
	E, IF ALLOWED BY POLICY	ESACS CASES		
Certified chaperones BEN ST	PHENS, CHARLOTTE WH	ILHELM, CJ WILHELM		
Classified chaperones	類			
Have all chaperones underg	one the required records	s check and been designated ☑ Yes ☐ No	by the principal/designee to	supervise students?
Have all students been notif	ied of the rules and reg	ulations regarding acceptable	behavior?	□ No
How have they been notifie	d? Letters home, and re	view of travel expectations		
		T i	1	
X-5		X1 19/4 4	Weles	
Faculty/Sponsor Signature	1	Principal Signature		
Trip has been approved	disapproved. Reason for d	isapproval		
1				
× Clu	Tenge			
	perintendent/De	signee		
Tom	BEER "WWO!	3-15-02		
Fau accomishe and/or out of state t			d by malian 00 26	

Denoistra constrains

SchoolRelated Student Trip Request Form

	SUBMIT THIS F	orm two (2) weeks Pi	RIOR TO YAKIN	G THE TRIP.	
School	F/	ACULTY MEMBER(S) SP	ONSORING TRI	r <u>Benjamin Steph</u>	<u>ens</u>
Type of Trip (check ALL	THAT APPLY):		·		
☐ Over 300 miles	Under 300 miles	\boxtimes	Co curricula	r □ Extracuri	icular
☐ Classroom Field Trip	☐ Organiza	ation/Club Trip	☑ Other (athletic, band, if a	pplicable)
DESTINATION Western Ky U	niversity Addri	ESS		Phone-destination	N
☐ Out of State ☐ Ou	ut of County	Within County	Overnight:	give name, addres	s, phone of lodging
DATE(S) OF TRIP 4/13/22		Departure Time 9:0	 00 AM	RETURN TIME 3:	30 PM
START					OR PM FROM DROPDOWN)
PURPOSE/EDUCATIONAL VAL	UE District Vocal A	ssessment Performand	<u>:e</u>		
What standard is being an	DRESSED BY TAKING	THIS TRIP? (DOES NOT	APPLY TO ATI	LETIC TRIPS.)	
WHITE AND ADDRESS OF THE PARTY					
Source of funding for tri	P To be billed to HS	Choir DAF			
		BE DENIED THE TRIP BI			
BILL TRIP EXPENSES TO:					V
Number of: students 30		s 10		STUDENTS 20	
Mode of Transportation:	IS DISTRICT TRA	NSPORTATION NEEDED?	□ NO	YES (SEE PROCE	EDURE 09.36 Ap. 212.)
☐ CERTIFICATED C	OMMON CARRIER; SP	ECIFY			
☐ Private vehicl	E, IF ALLOWED BY PO	DLICY; SPECIFY DRIVER	(s)		
Certified chaperones BEN S	TEPHENS, CHARLOTTI	WHILHELM			
Classified chaperones					11.00
Have all chaperones underg	one the required re	cords check and been ☑ Yes ☐ No	designated b	y the principal/des	signee to supervise students
Have all students been noti	fied of the rules and	l regulations regarding	g acceptable	ehavior?	☑ Yes ☐ No
How have they been notified	d? <u>Letters home, a</u>	nd review of travel ex	pectations		
X/25	<u> </u>	_ X 🗸	19 by 4	Miles	
Faculty/Sponsor Signature	2	Principal 9	Signature		
Trip has been approved	disapproved Reason	for disapproval			
The has been as approved a	disapproved. Iteason	Tot disapprovat			
Signature of Su	my perintendent	/Designee			
Ton Be	le "ume"	3-15-02			
For overnight and/or out-of-state	trips, approval of the Su	perintendent and/or Board	may be required	by policy 09.36.	

" sovardo chisamz,

School-Related Student Trip Request Form
SUBMIT THIS FORM FOUR (4) WEEKS PRIOR TO TAKING THE TRIP.
SCHOOL CCHS FACULTY MEMBER(S) SPONSORING TRIP Sher; Han to CK TYPE OF TRIP (CHECK ONE):
Over 300 miles Under 300 miles Cocurricular Extracurricular
DESTINATION Male High School ADDRESS 4409 Preston HPHONE 502 -7/2 - 339
Out of State Out of County Within County Overnight: give name, address, phone of lodging
DATE(S) OF TRIP 3-25 to 3-26 DEPARTURE TIME 5:30 P.M FO RETURN TIME 9:00 P.M Sat
PURPOSE/EDUCATIONAL VALUEA+bletics
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)
Source of funding for trip CCHS Softhall Boosters
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 /6 MALE STUDENTS FEMALE STUDENTS /6
MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? IN NO VYES (SEE PROCEDURE 09.36 AP. 212.) CERTIFICATED COMMON CARRIER; SPECIFY
☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)
CERTIFIED CHAPERONES Sher: Hancock
CLASSIFIED CHAPERONES Jason Crick Bryan Shaw
Have all chaperones undergone the required records check and been designated by the principal/designee to supervise students? Described by the principal designee to supervise students? Described by the principal descri
APPROVAL IMPOSSIBLE SHOULD ALSO HAVE THE SIGNATURE OF THE BOARD CHAIRPERSON
Trip has been papproved disapproved. Reason for disapproval
AA A
Signature of Superintendent/Designee Date
Signature of Superintendent/Designee 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

emyerry approval

SchoolRelated Student Trip Request Form

SCHOOL TYPE OF TRIP	SUBMIT THIS FORM FOUR (4) WEEKS PRIOR TO TAKING THE TRIP.
☐ Over 300 r	선생님은 사람들이 나는 사람들이 살아보고 아니는 사람들이 아니는 아니는 사람들이 아니는 아니는 사람들이
□ Out of State lodging SU DATE(S) OF TRIE	Der 8 2028 N. Mulberry Street, Elizabethtown, Ky. 42701
PURPOSE/EDUC	ATIONAL VALUE SOFT ball Tournament
	RD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)
SOURCE OF FUN	IDING FOR TRIP
AMOUNT OF ST	UDENT FEE:
NUMBER OF: ST MODE OF TRAN	NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY. NSES TO: D SPONSORING ORGANIZATION D SCHOOL COUNCIL DOARD DOTHER UDENTS FEMALE STUDENTS FEMALE STUDENTS SPORTATION: IS DISTRICT TRANSPORTATION NEEDED? D NO DE YES (SEE PROCEDURE 09.36 AP. TIFICATED COMMON CARRIER; SPECIFY
	RIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)
CERTIFIED CHA	perones Tara Tollver
CLASSIFIED CH.	APERONES ANadia McCory
supervise stude	erones undergone the required records check and been designated by the principal/designee to nts? Yes No
Signature of Fa EMERGENCY APPROVAL IN	REQUESTS DUE TO UNFORSEEN CIRCUMSTANCES THAT MAKE PRIOR BOARD MPOSSIBLE SHOULD ALSO HAVE THE SIGNATURE OF THE BOARD CHAIRPERSON
Trip has been 🕼	approved disapproved. Reason for disapproval
	Christa 3-2022
	ure of Superintendent/Designee Date
	ure of Roard Chair
2000	ght and/or out-of-state trips, approval of the Superintendent and/or Board may be required by policy 09.36.
RELATED PRO	
	P.211, 09.36 AP.212, 09.36 AP.23
05,00011	Review/Revised:11/21/13
	greenederson abbearing
	Vehicle Request Form
School	Faculty Member(s) sponsoring trip

School Related Student Trip Request Form

: :	SUBMIT THIS F	ORM TWO (2) WEEKS PRIOR TO TAKIN	G THE TRIP.
SCHOOL GATEWAY	F	ACULTY MEMBER(S) SPONSORING TRI	Robert Lee
Type of Trip (CHECK ALL Over 300 miles xl Classroom Field Trip	THAT APPLY): ☐ Under 300 miles ☐ Organiza		ar □ Extracurricular athletic, band, if applicable)
DESTINATION Crowne Plaz	,—		PHONE-DESTINATION
		WEST CONTROL OF THE C	give name, address, phone of lodging
Date(s) of Trip Apr 13	-16	DEPARTURE TIME 9:00AM	RETURN TIME 1:00 PM
Start	END	(Select AM or PM from Dropdown)	(SELECT AM OR PM FROM DROPDOWN)
Purpose/Educational Val	UE Required CT	SO competition, Robotics training	
WHAT STANDARD IS BEING AI	DDRESSED BY TAKING	THIS TRIP? (DOES NOT APPLY TO AT	ILETIC TRIPS.)
Source of funding for tri	Perkins and V	OC Fund 1	
Number of: students 2 Mode of Transportation: x Certificated	SPONSORING ORGANI MALE ST S IS DISTRICT TRAI COMMON CARRIER; S		
Certified chaperones1	~ Robert Lee		
Classified chaperones	_		
Have all students been noti	fied of the rules and	x□ Yes □ No d regulations regarding acceptable t	y the principal/designee to supervise students sehavior? x□ Yes □ No
How have they been notific		X founds	git
Faculty/Sponsor Signatur	e	Principal Signature	
Trip has been 🛮 approved 🗆	disapproved. Reason	for disapproval	
Signature of Su	m w y perintendent	<u> </u>	
	Nonstell	yerintendent and/or Board may be required	by policy 09.36.

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School Related Student Trip Request Form

SCHOOL GATEWAY ACADEMY	FACILITY MEMBER(S) SPONSORNIA	longifor MacO-in
TYPE OF TRIP (CHECK ALL THAT APPLY):	FACULTY MEMBER(S) SPONSORING	rrip <u>Jenniler McCain</u>
Over 300 miles X Under 300 miles	V 6	
V GI	X Co curricular zation/Club Trip Other (
		athletic, band, if applicable)
DESTINATION Millbrooke ADDR Elementary/Hopkinsville Middle Koffr	nan Dr Hopkinsville	PHONE-DESTINATION 270-887-7270
School Wilder Roll	nan Dr., Hopkinsville	
	Within County Overnight: §	give name, address, phone of lodging
DATE(S) OF TRIP <u>04/12/22</u>	DEPARTURE TIME 8:40am	RETURN TIME 2:30pm
START END	(SELECT AM OR PM FROM DROPDOWN)	(SELECT AM OR PM FROM DROPDOWN)
PURPOSE/EDUCATIONAL VALUE The Teachi	ng and Learning scholars will o	A CONTRACTOR OF THE CONTRACT O
to see the daily expectations of teacher students.	s as well as the daily routines	s of a classroom with public school
WHAT STANDARD IS BEING ADDRESSED BY TAI The Teaching and Learning pathway allow experiences such as these allow the school	S THE SCHOLORS to overlose the!	
		of them as a togehor: from leasure
plan delivery to classroom management to	supervision during lunch.	or mont as a teacher. Ifom lesson
SOURCE OF FUNDING FOR TRIP		
	E DENIED THE TRIP BECAUSE OF AN	
BILL TRIP EXPENSES TO: SPONSORING ORG.		GODINIT TITIO TOKINI TVVO (2) VVI
		BOARD OTHER
MODE OF TRANSPORTATION: IS DISTRICT TR	UDENTS 2 FEMALE S	VES OFF PROGRAM
CERTIFICATED COMMON CARRIER;	SPECIEV NO 7	X YES (SEE PROCEDURE 09.36 AP. 212.)
PRIVATE VEHICLE, IF ALLOWED BY		
Certified chaperones 2	TODICI, SI ECIFI DRIVER(S)	
Classified chaperones		
Have all change undergone the required		
Have all chaperones undergone the required rec	X Yes No	the principal/designee to supervise students?
Have all students been notified of the rules and		() X X X
How have they been notified? in writing		havior? X Yes No
X Junique Cain		
Annigu ans auro	0	
X	X alicia K	Yanasata.
	- Madeiga M	" (XCOMBEONE)
Faculty/Sponsor Signature	Principal Signature	=
-	i micipai signature	
Trip has been approved disapproved. Reason fo	r disapproval	
disapproved, Reason to	usapprovat	1
11 0		2
X (Mm yent	is	
Signature of Superintendent/D	Designed	
		*
i un bell	1Kme4 4-11-22	
For overnight and/or out-of-state trips, approval of the S	Superintendent and/or Board may be req	uired by policy 09.36.

Comergency appround