Prom decorating

#### **STUDENTS**

09.36 AP.21

School-Related Student Trip Request Form
SUBMIT THIS FORM FOUR (4) WEEKS PRIOR TO TAKING THE TRIP.
SCHOOL <u>CHRISTIAN CO. HS</u> FACULTY MEMBER(S) SPONSORING TRIP MS G TYPE OF TRIP (CHECK ONE):
O Over 300 miles O Classroom Field Trip O Organization/Club Trip O Cocurricular O O Cocurricular O O Other (athletic, band, if applicable
DESTINATION Bruce Convention Center
Address_303 Conférence Drive Hopkinsville try PHONE_270-707-7000
O Out of State O Out of County Within County O Overnight: give name, address, phone of lodging
DATE(S) OF TRIP_05-/3 @Q DEPARTURE TIME RETURN TIME
PURPOSE/EDUCATIONAL VALUE Decorating for PROM
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)
SOURCE OF FUNDING FOR TRIP 200 M
AMOUNT OF STUDENT FEE:
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.
BILL TRIP EXPENSES TO: O SPONSORING ORGANIZATION O SCHOOL COUNCIL O BOARD O OTHER
NUMBER OF: STUDENTS 5 FEMALE STUDENTS 10
MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? O NO O YES (SEE PROCEDURE 09.36 AP. 212.)O CERTIFICATED COMMON CARRIER; SPECIFY
O PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)
CERTIFIED CHAPERONES Journal Gieseke
CLASSIFIED CHAPERONES
Have all chaperones undergone the required records check and been designated by the principal/designee to supervise students? O Yes O No  Have all students been notified of the rules and regulations regarding the heavier? O Yes O No  How have they been notified?  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 O disapproved. Reason for disapproval
Amorton E-10 3-2
Signature of Superintendent/Designee Date
Tombell 14men 5-10-22
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

several orberray

Mural Painting

#### **STUDENTS**

09.36 AP.21

School-Related Student	Trip Req	uest Form
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SUBMIT THIS FORM FOUR (4) WEEKS PRIOR TO TAKING THE TRIP.
SCHOOL CHRISTIAN CO. HS FACULTY MEMBER(S) SPONSORING TRIP
TYPE OF TRIP (CHECK ONE):
O Over 300 miles
DESTINATION_Historical Society Building
ADDRESS_310 E 9th Street Hopkinsville Ky 42240
PHONE 270-887-4270
O Out of State O Out of County Within County O Overnight: give name, address, phone of lodging
DATE(S) OF TRIP 05 -09-22 DEPARTURE TIME RETURN TIME
Purpose/Educational Value Painting ag Mural for city
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)
Source of funding for trip $\sqrt{A}$
AMOUNT OF STUDENT FEE:
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.
BILL TRIP EXPENSES TO: O SPONSORING ORGANIZATION O SCHOOL COUNCIL O BOARD O OTHER
Number of: students <u>5</u> Male Students <u>3</u> Female Students <u>9</u>
MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? O NO O YES (SEE PROCEDURE 09.36 AP. 212.)O CERTIFICATED COMMON CARRIER; SPECIFY
O PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)
CERTIFIED CHAPERONES Paula Gieseke
CLASSIFIED CHAPERONES
Have all chaperones undergone the required records check and been designated by the principal/designee to supervise
students? O Yes O No  Have all students been notified of the rules and regulations regarding How have they been notified?
The Day of the state of the sta
Signature of Faculty Sponsor  Have all students been notified of the rules and regulations regarding How have they been notified?  Date  Date  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 O disapproved. Reason for disapproval
Christoph 5-10 2022
Signature of Superintendent/Designee Date
Ton Bell "Kene" 5-10-20
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

Imergency approved

School-Related Student Trip Request Form
SUBMIT THIS FORM FOUR (4) WEEKS PRIOR TO TAKING THE TRIP.
SCHOOL CCHS FACULTY MEMBER(S) SPONSORING TRIP Toby Miles
TYPE OF TRIP (CHECK ONE):
□ Over 300 miles □ Cocurricular □ Extracurricular
☐ Classroom Field Trip ☐ Organization/Club Trip ☐ Other (athletic, band, if applicable
DESTINATION Union Maires ity Address 1050 Unios University De Jackson Tophone
Out of State  Out of County  Within County  Overnight: give name, address, phone of
DATE(S) OF TRIP 6/13 to 6/16 DEPARTURE TIME TEN RETURN TIME TEL
Purpose/Educational Value basketball Team Camp
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)
Source of funding for trip Boys Basketball
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 25 Male Students 25 Female Students
MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? ☐ NO ☐ YES (SEE PROCEDURE 09.36
AP. 212.)□ CERTIFICATED COMMON CARRIER; SPECIFY
CERTIFIED CHAPERONES To by Miles, Kortez Ivery Darrius Mumford
CERTIFIED CHAPERONES TO AN INTEREST TO AND INTEREST TO AN INTEREST TO AND INTEREST TO AN INTEREST TO AND INTEREST TO AN INTEREST TO AND INTEREST.
CLASSIFIED CHAPERONES
Have all chaperones undergone the required records check and been designated by the principal/designee to supervise
students? Pres No Have all students been notified of the rules and regulations regarding
acceptable behavior? Yes \( \subseteq \text{No} \) How have they been notified Corrections
1 18km M.D. 5/9/22 MHS 5/9/22
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 approved disapproved. Reason for disapproval
Clam Frm - 5-9222
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

	SUBMIT THIS FO	ORM TWO (2) WEEK	S PRIOR TO TAKIN	G 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	☐ Extracu	Ticular
☐ Classroom Field Trip	☐ Organiza	ation/Club Trip	Other (	athletic, band, if	applicable)
DESTINATION Middletown	Christian Addre	ess	1	Phone-destinati	ON
Church		WATTERSON TRAI	iL, Louisville,		
	KY 40				100 March 200-2 Av
☐ Out of State      ☑ Ou	at of County 🛛	Within County	Overnight:	give name, addre	ss, phone of lodging
D. (a) on Tour 4/29/22		DEPARTURE TIME	9.00 AM	RETURN TIME 8	DM
DATE(S) OF TRIP 4/28/22	END	(SELECT AM OR PM			OR PM FROM DROPDOWN)
Purpose/Educational Val				(GELECI AIM	OR I IN PROM DAULDOWNY
WHAT STANDARD IS BEING AD				H ETIC TRIBE	
WHAI SIANDARD IS BEING AL	DRESSED BY TAKING	IMIS IMP: (DOES)	NOI APPLY TO ATT	ilenc imrs.	
Source of funding for tri	P To be billed to HS	Choir DAF			
	NO STUDENT SHALL		P BECAUSE OF AN	INABILITY TO PAY	•
BILL TRIP EXPENSES TO:	SPONSORING ORGANI	ZATION SCHOOL	L COUNCIL B	DARD OTHER	
Number of: students 42	MALE STUDENT:	s 18	FEMALE	STUDENTS 24	
Mode of Transportation:	IS DISTRICT TRA	NSPORTATION NEEDI	ED? 🗆 NO	YES (SEE PROC	EDURE 09.36 AP. 212.)
☐ CERTIFICATED C	OMMON CARRIER; SP	ECIFY			
☐ Private vehicle	E, IF ALLOWED BY PO	LICY; SPECIFY DRIV	/er(s)		
Certified chaperones BEN S	TEPHENS, CHARLOTTE	WHILHELM			
Classified chaperones			AAA Marana ahaa ahaa ahaa ahaa ahaa ahaa ahaa		Minute Scotting of A
Have all chaperones underg	one the required re-	cords check and be	een designated by	y the principal/de	esignee to supervise students
		⊠ Yes □			
Have all students been notif	fied of the rules and	l regulations regard	ding acceptable b	ehavior?	☑ Yes ☐ No
How have they been notified	d? Letters home, ar	nd review of travel	expectations		
			¥		
X	2	X(	Joly 4	Miles	
Faculty/Sponsor Signature Principal Signature					
			30	-	
Trip has been approved	disapproved. Reason	for disapproval			
× Clm	n Jenty				
Signature of Sup					
Ton	Bell'	"Kne" 4-	3D-22		
For overnight and/or out-of-state trins, approval of the Superintendent and/or Board may be required by policy 09.36.					

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SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO TAKING THE TRIP.	
SCHOOL* CCHS FACULTY MEMBER(S) SPONSORING TRIP_H. Com	
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 Southern James Address 3001 Courter Pike PHONE-DESTINATION 270-874-23	405
Out of State Out of County Within County Overnight: give name, address, phone of lodging	
DATE(S) OF TRIP May (OH)  DEPARTURE TIME *	
START (SELECT AM OR PM FROM DROPDOWN) (SELECT AM OR PM FROM DROPDOWN)	
PURPOSE/EDUCATIONAL VALUE PBIS ReWard	
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)	
BONAVION EXPLOTATIONS SOURCE OF FUNDING FOR TRIP YSC & SITE BASED	
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 125 MALE STUDENTS 63 Approxil	rate
MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? \(\subseteq\) NO \(\subseteq\) 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   Ves  No	?
Have all students been notified of the rules and regulations regarding acceptable behavior? Yes \( \subseteq \) No	
How have they been notified? I while group	
X Som Kom X Marsh	
- John Committee	
Faculty/Sponsor Signature Principal Signature	
Trip has been approved disapproved. Reason for disapproval	
aryford 4.29-2020	
Tom BOOD WARREN	
I am Bed "Kine"	
For overnight and/or out-of-state trips, approval of the Superintendent and/or Board may be required by policy 09.36.	

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SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO TAKING THE TRIP.
SCHOOL* CCHS FACULTY MEMBER(S) SPONSORING TRIP LEVY
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 Holiday Way loaderss 452 E. Christmen Blud PHONE-DESTINATION 900-467-2682
Out of State Out of County Within County Overnight: give name, address, phone of lodging
DATE(S) OF TRIP May 20th, 2022 DEPARTURE TIME 8:30 am RETURN TIME 5:00 pm
START END (SELECT AM OR PM FROM DROPDOWN) (SELECT AM OR PM FROM DROPDOWN)
PURPOSE/EDUCATIONAL VALUE (LOSS of 2022 Remard Trip for Post Secondary
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)
Source of funding for TRIP
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 47 Male Students 62 Female Students 43
Mode of Transportation: is district transportation needed? \(\subseteq\) no \(\subseteq\) 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 \sum No
Have all students been notified of the rules and regulations regarding acceptable behavior? Wes \( \subseteq \text{No} \) How have they been notified? \( \text{DWOUL} \); \( \text{PENSEN-to-person} \) \( \text{PENSEN-to-person} \) \( \text{PENSEN} \); \( \text{PENSEN} \)
How have they been notified? Dwould, for son- To person meetry; powers, person
X Regarden X All
Faculty/Sponsor Signature Principal Signature
Trip has been approved disapproved. Reason for disapproval
Christyo 4-29-02 Tom Bell "Mne"
For overnight and/or out-of-state trips, approval of the Superintendent and/or Board may be required by policy 09.36.

renoderal abbument

Submit this form two (2) weeks prior to taking the trip.
SCHOOL* CC) (S FACULTY MEMBER(S) SPONSORING TRIP Kern
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 HILL ADDRESS 452 E. CHVISHMAN BIVAPHONE-DESTINATION SOO - 467-268 Classe. TWHONE-DESTINATION Overnight: give name, address, phone of lodging
DATE(S) OF TRIP MON 19th, 2002 DEPARTURE TIME 8:30 RETURN TIME 5:30
PURPOSE/EDUCATIONAL VALUE CLOSS of 2023 ACT Growth TVIP
· · · · · · · · · · · · · · · · · · ·
What standard is being addressed by taking this trip? (Does not apply to athletic trips.)
SOURCE OF FUNDING FOR TRIP
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 100 MALE STUDENTS 63 Approx.
Mode of Transportation: is district transportation needed? \(\subseteq\) no \(\subseteq\) 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?
Have all students been notified of the rules and regulations regarding acceptable behavior? Yes No
How have they been notified? plums som slep
X Stear from X Marsh
Faculty/Sponsor Signature Principal Signature
Trip has been approved disapproved. Reason for disapproval
Christings Ton Bed where "4-29-22
For overnight and/or out-of-state trips, approval of the Superintendent and/or Board may be required by policy 09.36.

prosides formbrong

SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO TAKING THE TRIP.
SCHOOL* CCHS FACULTY MEMBER(S) SPONSORING TRIP COM
TYPE OF TRIP (CHECK ALL THAT APPLY):
☐ Over 300 miles ☐ Co curricular ☐ Extracurricular
☐ Classroom Field Trip ☐ Organization/Club Trip ☐ Other (athletic, band, if applicable)
DESTINATION_WE CINEMA ADDRESS 400FF CAMPBELL PHONE-DESTINATION 270-887-5900
Out of State Out of County Within County Overnight: give name, address, phone of lodging
DATE(S) OF TRIP May 1940  DEPARTURE TIME 9: 3:00 M RETURN TIME 11: 60 Com
PURPOSE/EDUCATIONAL VALUE GOOD FOOTH STATE OF THE FOOTH OF PM FROM DROPDOWN)  PURPOSE/EDUCATIONAL VALUE GOOD FOOTH STATE OF THE STATE O
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)
Source of Funding For Trip School COUNCIL
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 215 MALE STUDENTS 100 FEMALE STUDENTS 115 Approximately
Mode of Transportation: is district transportation needed?   NO TYPES (SEE PROCEDURE 09.36 AP. 212.)
ERTIFICATED 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? Ves No
How have they been notified? <u>Omoull</u> , Canvas, whole group
X Josen Kern X Maus &
Faculty/Sponsor Signature Principal Signature
Trip has been approved disapproved. Reason for disapproval
Tom Bell "kne"
For overnight and/or out-of-state trips, approval of the Superintendent and/or Board may be required by policy 09.36.

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SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO TAKING THE TRIP.
SCHOOL* CCHS FACULTY MEMBER(S) SPONSORING TRIP . Cern
TYPE OF TRIP (CHECK ALL THAT APPLY):
☐ Over 300 miles ☐ Co curricular ☐ Extracurricular
Classroom Field Trip Organization/Club Trip Other (athletic, band, if applicable)
DESTINATION South Plan Jawas Dress 3001 Canten Pike PHONE-DESTINATION 270-874-2265
Out of State Out of County Within County Overnight: give name, address, phone of lodging
DATE(S) OF TRIP, LOUY 13th DEPARTURE TIME * RETURN TIME *
START END (SELECT AM OR PM FROM DROPDOWN) (SELECT AM OR PM FROM DROPDOWN)
PURPOSE/EDUCATIONAL VALUE ECPA REWAYD TOP
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)
- reward for TSK
Source of funding for thip School Council
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 60 MALE STUDENTS 30 FEMALE STUDENTS 36 AMONIMONTS
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 3
Classified chaperones
Have all chaperones undergone the required records check and been designated by the principal/designee to supervise students?
Have all students been notified of the rules and regulations regarding acceptable behavior? Ves \(\sigma\) No
How have they been notified? Dwail; while group
X I Va X Alex
- Dangem - Mayour
Faculty/Sponsor Signature Principal Signature
Trip has been approved disapproved. Reason for disapproval
Christing 429 100
" Drix bell "Kine"
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. FACULTY MEMBER(S) SPONSORING TRIP SCHOOL TYPE OF TRIP (CHECK ONE): ☐ Cocurricular ☐ Extracurricular ☐ Over 300 miles Under 300 miles ☐ Organization/Club Trip ☐ Other (athletic, band, if applicable Classroom Field Trip Frails For Cooke ADDRESS 4/00 11 Main DESTINATION FIGURE ☐ Out of County Out of State lodging 9:00 an RETURN TIME 5:00 pm DEPARTURE TIME DATE(S) OF TRIP May PURPOSE/EDUCATIONAL VALUE WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.) KEHAULOR NO WATERS NO SOURCE OF FUNDING FOR TRIP NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY. ☐ BOARD **E**OTHER BILL TRIP EXPENSES TO: 

SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL NUMBER OF: STUDENTS 255 MALE STUDENTS\_ FEMALE STUDENTS MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? ☐ NO ☒ YES (SEE PROCEDURE 09.36 ☐ CERTIFICATED COMMON CARRIER; SPECIFY AP. 212.) ☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY: SPECIFY DRIVER(S) CLASSIFIED CHAPERONES Have all chaperones undergone the required records check and been designated by the principal/designee to Have all students been notified of the rules and regulations regarding acceptable behavior? A Yes 🗆 No How have they been notified? Signature of Facility Sponsor Signature of Principal EMERGENCY REQUESTS DUE TO UNFORSEEN CIRCUMSTANCES THAT MAKE PRIOR BOARD APPROVAL IMPOSSIBLE SHOULD ALSO HAVE THE SIGNATURE OF THE BOARD CHAIRPERSON ☐ disapproved. Reason for disapproval Trip has been approved 4-29/2020 Signature of Superintendent/Designee

RELATED PROCEDURES: 09.36 AP.211, 09.36 AP.212, 09.36 AP.22, 09.36 AP.23

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

Review/Revised: 1/15/09

Venerghey approved

Signature of Board Chair

	SUBMIT THIS FORM T	WO (2) WEEKS PRIOR TO TAKIN	NG THE TRIP.	
School	FACULT	y Member(s) sponsoring tr	IP	
Type of Trip (check ALL	THAT APPLY):			
	Under 300 miles	☐ Co curricula		
☐ Classroom Field Trip	Organization/	Club Trip	(athletic, band, if ag	oplicable)
DESTINATION VEX Work	) & COMP, ADDRESS	onlerios Clare	PHONE-DESTINATION	oplicable)  N 214-939 2700  s, phone of lodging
		170	- Marriot	ine commerce or
DATE(s) OF TRIP $\frac{5-3}{S_{TART}}$	5 - 8 - 2 Z DEPA	ARTURE TIME 9.00 AM ELECT AM OR PM FROM DROPDOWN)	RETURN TIME //	1:00 PM Dallas TX (2-14) ZGO R PM FROM DROPDOWN)
	70	- VEX Worlds C	9//	
		TRIP? (DOES NOT APPLY TO AT		,
Source of funding for trib		rict Reld trip		
Р		ENIED THE TRIP BECAUSE OF AN		
1 .		N □ SCHOOL COUNCIL □ B	74	
Number of: students //		N = N	STUDENTS /	00 26 (p. 212 )
Mode of Transportation:		TATION NEEDED?	the are the street on the street of the stre	
☐ CERTIFICATED C	OMMON CARRIER; SPECIFY	- Ren	KI VANS	Penny KniGHT
PRIVATE VEHICLE	E, IF ALLOWED BY POLICY;	SPECIFY DRIVER(S)	.,	Penny Knibur Robert Lee Patri Messamo
	6			Patti messamo.
Classified chaperones	=			
Have all chaperones underg		check and been designated b	y the principal/des	ignee to supervise students?
Have all students been notif	ned of the rules and regul	lations regarding acceptable	behavior?	Yes 🗆 No
How have they been notifie	d? NiA Perms.	sion slipard p	arent mee	TIM 6
Faculty/Sponsor Signature	2	X Lenny	Inight)	
Trip has been approved	disapproved. Reason for dis	approval		
× Oh	They 4-	29-02		
	perintendent/Des			
	Expression and the Superinter	4-29-23 Indent and/or Board may be required	by policy 09.36.	

" energency approve"

		orm two (2) weeks			
SCHOOL Gateway	FA	ACULTY MEMBER(S)	SPONSORING TRI	P Ben ?	Smith
Type of Trip (check ALL	THAT APPLY):				
☐ Over 300 miles	Under 300 miles	(	Co curricula:	r □ Extracu	rricular
☐ Classroom Field Trip ☐ Organization/Club Trip ☐ Other (athletic, band, if applicable)					
DESTINATION Lexington,				PHONE-DESTINAT	
☐ Out of State ☐ Ou	it of County	Within County	Overnight:	give name, addr	ess, phone of lodging
DATE(S) OF TRIP 40 25-	27	DEPARTURE TIME	9:00 AM	RETURN TIME	5:00 PM
Start	END	(SELECT AM OR PM			OR PM FROM DROPDOWN)
Purpose/Educational Val	UE TSA Competit	ron - required	for Perkins.	Fundenn in	Engineering
WHAT STANDARD IS BEING AD	DRESSED BY TAKING	THIS TRIP? (DOES N	OT APPLY TO ATI	HLETIC TRIPS.)	, 0
Source of funding for tri	P Derkins	+ VOC Fun	ell		
	No student shall	BE DENIED THE TRU	BECAUSE OF AN	INABILITY TO PA	Υ.
BILL TRIP EXPENSES TO:	SPONSORING ORGANI	IZATION SCHOOL	COUNCIL DB	OARD OTHER	
Number of: students	MALE ST	TUDENTS 5	FEMALE	STUDENTS	
Mode of Transportation:				☐ YES (SEE PRO	CEDURE 09.36 AP. 212.)
CERTIFICATED C	OMMON CARRIER; SP	ECIFY Enterpris	e		
	E, IF ALLOWED BY PO		ER(S)		10 = 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2
Certified chaperones	Benjamin	Smith			
Classified chaperones	_				
Have all chaperones underg	one the required re	cords check and be		y the principal/d	esignee to supervise studen
Have all students been notified How have they been notified				oehavior?	√ Yes □ No
X655	3	XY	Jenny Knie	jut	
Faculty/Sponsor Signature	3	Principa	al Signature		
			*		
Trip has been □ approved □	disapproved. Reason	for disapproval	_		
Signature of Sup	Tens	/Designee			
	m Bill				
For overnight and/or out-of-state			rd may be required	by policy 09 36	

"amosevery abbusing"

#### SUBMIT THIS FORM BY THE FIRST THURSDAY OF MONTH.

NOTE: DISTRICT WILL REVIEW ON THE THIRD THURSDAY ON THE MONTH.

#### **STUDENTS**

09.36 AP.21

#### **School-Related Student Trip Request Form**

SCHOOL: Hap Kins ville High Faculty Member sponsoring trip: Ashlen Type of Trip (Check one):
O Over 300 miles O Under 300 miles O Co-curricular O Extracurricular
O Classroom Field Trip Organization/Club Trip O Other (athletic, band, if applicable)
DESTINATION OPTY MILS ADDRESS 433 OPTY MILS DE PHONE 615-514-1000
O Out of State Out of County O Within County O Overnight: give name, address, phone of
lodging
DATE(S) OF TRIP May 9th DEPARTURE TIME 8:30 RETURN TIME 3:15
PURPOSE/EDUCATIONAL VALUE Team Build preparing for pext year
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)
Source of Funding For Trip Yealbook, Student Council
AMOUNT OF STUDENT FEE: \$ 5.00
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.
BILL TRIP EXPENSES TO: OSPONSORING ORGANIZATION OSCHOOL COUNCIL OBOARD OTHER
Number of: students 50 Male Students 40 Female Students 10
MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? O NO OYES (SEE PROCEDURE 09.36 AP. 212.)
O CERTIFICATED COMMON CARRIER; SPECIFY
O PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)
CERTIFIED CHAPERONES Andrew Ashton Amanda Ashton
Anthony Holloway Philip Bader
CLASSIFIED CHAPERONES
Have all chaperones undergone the required records check and been designated by the principal/designee to supervise
students? O Yes O No Have all students been notified of the rules and regulations regarding
acceptable behavior? O Yes O No How have they been notified?
and the second s
Signature of Faculty Sponsor Date Signature of Puncipal Date
EMERGENCY REQUESTS DUE TO UNFORESEEN CIRCUMSTANCES THAT MAKE PRIOR BOARD APPROVAL IMPOSSIBLE SHOULD ALSO HAVE THE SIGNATURE OF THE BOARD CHAIRPERSON
Trip has been approved O disapproved. Reason for disapproval
Martine years
Signature of Superintendent Designee Date
Tom 2000 many 4-20-20
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

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