**STUDENTS** 

#### BEECHWOOD INDEPENDENT SCHOOLS

09.36 AP.21

## TRANSPORTAION/FIELD TRIP REQUEST FORM

	TODAY'S DATE 8/4/2022	☐ Elementary	☑ High School	☐ Guardian Angel			
L MAIL	Faculty/Staff/Coach/Sponsor(s) Austin Bi	ralley					
>	Date(s) of Trip October 15, 2022	Departure Time ~10		eturn Time <u>~11:00pm</u>			
ر =:	*If Peanut/Tree Nut Allergy Safety Alert is checke faculty/staff member(s) sponsoring this trip are re	ed on the School-Related Tri esponsible to ensure buses/n	p Permission Slip and Monday	Medical Release Form (09.36 AP.211) then comply with procedure related to foods on			
	TYPE OF TRIP (CHECK ONE):						
	Classroom Field Trip, Specify Class						
2	Class Trip (i.e. Junior, Senior), Specify						
	Organization/Club Trip, Specify						
	Other (athletic, band, if applicable), Specify Marching Band **DESTINATION George Rogers Clark HS Miles (one way) to destination: 95						
	City/State Winchester, KY						
	Overnight: Give name of lodging and a						
		addi ess					
	TRANSPORTATION  3 Number of Russe pooded (1 driver)			7a			
	Number of <b>Buses</b> needed (1 driver)	per dus uniess otherwise i	ndicated) or L	J Suburban ☐ Van See 09.36 AP.212			
	**Does trip exceed 100 miles?	es 🗹 No 🏻 <b>If Yes, tr</b>	ip requires Board	of Education approval.			
	THIS SECTION COMPLETED BY TRANSPO	ORTATION DEPARTMEN	NT				
	Bus Available ☐Yes ☐No Sul	burban Available 🗀 Yes	s □No V	an Available □Yes □No			
	Bus # has bee	The state of the s					
	Transportation Supervisor	ure		10.10.22 Date			
Ť	☐ Use of Common Carrier in Lieu of Scho	not Bus P	rocedure 09.36				
				quires Board of Education approval)			
	$\square$ Private Vehicle, if allowed by policy. S	pecify Driver(s)					
	Purpose/Educational Value George Rogers Clark Band Invitational						
	Number of days absent from school 0	Number of: Students	Going on Trip $\frac{\sim 90}{}$	Faculty/Staff_4			
		RE ALL CHAPERONES					
	IF NO, THEY WILL NEED TO COMPLETE THE YOUTH LEADER FORM AND BE APPROVED PRIOR TO CHAPERONING.  SUPERVISION – Attach a list of names of adults accompanying students on trip.						
Ī	Trip Approved	or addits accompanying	students on trip.				
ł	■Yes □No Principal	Mi h. Van	-	10/10/22			
L	)	Signature	7	Date			
ĺ	Trip Approved	no V	Son	10/ /-			
	☐Yes ☐No Superintendent/Designee_	my		10/10/22			
	☐Yes □No Board of Education _	Signature A	14	Date			
	Dodia of Education	Signature 70 V		Date 1			
L	Related Procedures: 09.36 AP.211, 09.36 AP.212, 0	09.36 AP.23		Review/Revised: November 2018			

# BEECHWOOD INDEPENDENT SCHOOLS

09.36 AP.21

## TRANSPORTAION/FIELD TRIP REQUEST FORM

<b> </b>	TODAY'S DATE 8/22/2022	Elementary	☑ High School	☐ Guardian Angel			
SWIF	Faculty/Staff/Coach/Sponsor(s) Austin B	ralley					
	Date(s) of Trip October 22, 2022	Departure Time <u>~11</u>	:00am Retu				
SWI	*If Peanut/Tree Nut Allergy Safety Alert is checked on the School-Related Trip Permission Slip and Medical Release Form (09.36 AP.211) then faculty/staff member(s) sponsoring this trip are responsible to ensure buses/mode of transportation comply with procedure related to foods on trip.						
=	TYPE OF TRIP (CHECK ONE):						
	Classroom Field Trip, Specify Class						
<del></del>	☐ Class Trip (i.e. Junior, Senior), Specif	Y	W N				
	Organization/Club Trip, Specify						
<u>5</u>	Other (athletic, band, if applicable), S	Specify Marching Band					
<del> </del>  UU	**DESTINATION Estill County HS		Miles (one wa	ay) to destination: 121			
	City/State Irvine, KY						
	$\square$ Overnight: Give name of lodging and						
AND	TRANSPORTATION						
INFORMATION	3 Number of <b>Buses</b> needed (1 driver	per bus unless otherwise	indicated) or $\square$				
Q	See 09.36 AP.212						
	**Does trip exceed 100 miles?  Yes  No  If Yes, trip requires Board of Education approval.						
	THIS SECTION COMPLETED BY TRANSPORTATION DEPARTMENT						
	Bus Available ☐Yes ☐No Su Bus # has be		s □No Van	Available □Yes □No			
	Transportation Supervisor			10-10-22			
Z	Signal Super Vision	nture		Date			
	Use of Common Carrier in Lieu of Sch		Procedure 09.36 mmon Carrier form, requ	uires Board of Education approval)			
	☐ Private Vehicle, if allowed by policy.	Specify Driver(s)					
	Purpose/Educational Value KMEA State						
	Number of days absent from school 0	Number of: Students	Going on Trip ~90	Faculty/Staff_4			
<b>\S</b>	Other Chaperones 9 ARE ALL CHAPERONES ON THE VOLUNTEER LIST? VEST NO						
COMPLE	IF NO, THEY WILL NEED TO COMPLETE THE YOUTH LEADER FORM AND BE APPROVED PRIOR TO CHAPERONING.  SUPERVISION – Attach a list of names of adults accompanying students on trip.						
	Trip Approved	or dudies decompanying	ig stadents on trip.				
		Mir 1 Xaun		10/10/22			
		Signature		Date			
	Trip Approved	Mits	Ba				
		Signatule	013	10 10 ZZ			
	Des □No Board of Education	7111	ne	10/10/20			
	,	Signature		Date			

**STUDENTS** 

### BEECHWOOD INDEPENDENT SCHOOLS

09.36 AP.21

## TRANSPORTAION/FIELD TRIP REQUEST FORM

-	TODAY'S DATE 8/4/2022	Elementary	High Sch	nool	Guardian Angel		
	Faculty/Staff/Coach/Sponsor(s) Austin Br Date(s) of Trip November 11-13	ralley  Departure Time1:0	0pm Nov 11	Return T	ime _100pm Nov 18 /2		
	*If Peanut/Tree Nut Allergy Safety Alert is checke faculty/staff member(s) sponsoring this trip are retrip.	ed on the School-Related Trip	Permission Slip	and Medical R	elease Form (09.36 AP.211) ther		
	TYPE OF TRIP (CHECK ONE):						
	Classroom Field Trip, Specify Class						
	☐ Class Trip (i.e. Junior, Senior), Specify						
	Organization/Club Trip, Specify						
	☑ Other (athletic, band, if applicable), S	pecify Marching Band					
	**DESTINATION Lucas Oil Stadium						
	City/State Indianapolis, IN		·				
	Overnight: Give name of lodging and address Camp Dellwood - 2301 N Girls School Rd, Indianapolis, IN 46214						
	TRANSPORTATION				;		
		per bus unless otherwise ir	ndicated) or	☐ Subu	ırban 🔲 Van See 09.36 AP.212		
	**Does trip exceed 100 miles?	es 🗌 No 🏻 If Yes, tri	p requires Bo	oard of Ed			
Ī	THIS SECTION COMPLETED BY TRANSPORTATION DEPARTMENT						
		burban Available □Yes		Van Avai	lable □Yes □No		
	Bus # has bee	n/reserved					
	Transportation Supervisor	Jung			10/10/22		
	☑ Use of Common Carrier in Lieu of Scho				Date		
	ose of Common Carrier in Lieu of Scho		ocedure 09.36 mon Carrier for	m, requires E	Board of Education approval)		
	☐ Private Vehicle, if allowed by policy. S				• • • •		
	-	. , , , , , , , , , , , , , , , , , , ,					
	Purpose/Educational Value BOA Grand National Championships						
		Number of: Students (		90	Faculty/Staff_4		
	0	RE ALL CHAPERONES					
	IF NO, THEY WILL NEED TO COMPLETE THE				CHAPERONING.		
r	SUPERVISION – Attach a list of names of adults accompanying students on trip.						
	Trip Approved	XLIV	<b>'</b> .				
		Signature 7.1	40		10/10/22		
ľ	Trip Approved	Significant (CS)	5		Date		
ı	☐ Superintendent/Designee_	MAX	Du		10/10/22		
	Superintendent/ Designee_	Signature	17		Daţe		
	☑Yes □No Board of Education _	/wine	lin		10/10/0		
		Signature			Date		
-	Related Procedures: 09.36 AP.211, 09.36 AP.212, 0	09.36 AP.23			Review/Revised: November 2018		