

# School-Related Student Trip Request Form

Section 1 (To be completed by requesting organization – Incomplete forms will be returned, causing a delay in scheduling transportation for the event)

Date of Request: 09/09/2022

Date of Event: 10/13/2022

Organization: South Todd Preschool

School: South Todd Elementary

Number of Passengers 61

Type of Trip (Check One)

In-County Instructional

In-County Athletic

Other: (Explain In Detail)

Out-of-County Instructional

Out-of-County Athletic

Out-of-State Instructional

Out-Of-State Athletic

Destination (Event, City, and State): Christian Way Farms, Hopkinsville KY

Planned Stops To and From: None

Departing Location: South Todd Elementary

Date of Departure: 10/13/2022

Time of Departure: 9:40 a.m.

Returning Location: South Todd Elementary

Date of Return: 10/13/2022

Time of Return: 2:30 p.m.

Chaperone/s: Addye Sawyers, Victoria Etheridge

Chaperone's Phone #: Addye- (270) 604-7044 Victoria- (270) 847-8895

Special Requests (Check One)

Van

Handicap Access

Other: (Explain In Detail)

If requesting the Van, has the person driving been certified and approved to drive?  Yes

No (Check One)

Person Driving Van: N/A

Trip Requested By: Addye Sawyers

Organization Responsible for Payment Todd County School District

Approval of Site Based Council Representative

*Jennifer Oyler*

Date:

9/19/22

## DISTRICT USE ONLY

### Section 2

Approval of District Representative

Date: Click here to enter a date.

## DRIVER – TURN THIS FORM IN WITH TIMESHEETS

### Section 3

Date/Time of Departure: Click here to enter text.

Odometer Start: Click here to enter text.

Date/Time of Return: Click here to enter text.

Odometer End: Click here to enter text.

I hereby certify that the above information is correct to the best of my knowledge.

Driver Signature

Date Click here to enter a date.

Driver Comments: Click here to enter text.

Coach or School Representative Signature

Date Click here to enter a date.