

Local Day Trip

PO #:

School- Related Student Trip Request Form
SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO THE TRIP

SCHOOL: SCES Dance FACULTY MEMBER SPONSORING TRIP: Tabitha Hall ^{volunteer coach}

☐ Classroom Field Trip ☐ Class Trip (whole grade), specify _____
☐ Organization/ Club: _____ ☐ other (athletic, band, etc.) _____

DESTINATION: Ballard High School ADDRESS: 6000 Brownsboro Rd. Louisville, Ky
☐ Out of State ☒ Out of County ☐ within County ☐ Overnight: 40222

DATE(S) OF TRIP: 1-14-23 DEPARTURE TIME: _____ RETURN TIME: _____
PURPOSE/ EDUCATION VALUE: Dance Competition

SOURCE OF FUNDING FOR TRIP: Fundraising/parent Pay
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF INABILITY TO PAY.

BILL TRIP EXPENSES TO:

☐ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☐ BOARD ☐ OTHER: _____
NUMBER OF STUDENTS: 13 FACULTY SPONSORS: 1 OTHER CHAPERONES: 13
TOTAL NUMBER OF PARTICIPATES: _____

MODE OF TRANSPORTATION:

IS DISTRICT TRANSPORTATION NEEDED? ☒ NO ☐ YES, SEE PROCEDURE 09.36 AP.212 ☐ BUS ☐ VAN transportation waivers on file
☐ CERTIFIED COMMON CARRIER; SPECIFY _____
☒ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) _____

SUPERVISION: (Attach a list of names of adults accompanying students on trip).

Have all chaperones undergone the required AOC check and been designated by the principal/designee to supervise students? ☐ YES ☐ NO

Tabitha Hall
Name of Faculty Sponsor

9-16-22
Date

Trip has been: ☐ approved ☐ disapproved. Reason: _____

[Signature]
Signature of Superintendent/Designee

1-19-22
Date

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

FIELD TRIP CHARGES: Bus Limit: 2 persons per seat

\$0.93 per mile

Regular hourly rate for driver; plus overtime

If driver's hours exceed 40 per week.

Overnight lodging: Single room.

Drive time starts 15 minutes before departure and
15 minutes after arrival.

Meals provided by sponsor: ☐ YES ☐ NO

Send copy to lunchroom: ☐ YES ☐ NO

Admission to event provided: ☐ YES ☐ NO

Number of Buses Requested: _____

TRANSPORTATION OFFICE USE ONLY:

Drivers: 1. _____ 2. _____ 3. _____

Local DAY Trip

School- Related Student Trip Request Form SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO THE TRIP

PO #:

SCHOOL: SCES Dance FACULTY MEMBER SPONSORING TRIP: Tabitha Hall ^{volunteer coach}

☐ Classroom Field Trip ☐ Class Trip (whole grade), specify _____
☐ Organization/ Club: _____ ☐ other (athletic, band, etc.) _____

DESTINATION: Cheer Elite Competition ADDRESS: Lexington, KY
☐ Out of State ☒ Out of County ☐ within County ☐ Overnight: ☒

DATE(S) OF TRIP: 2-25-23 DEPARTURE TIME: _____ RETURN TIME: _____
PURPOSE/ EDUCATION VALUE: _____

SOURCE OF FUNDING FOR TRIP: Fundraising / Parent Day
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF INABILITY TO PAY.

BILL TRIP EXPENSES TO:

☐ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☐ BOARD ☐ OTHER: _____
NUMBER OF STUDENTS: 13 FACULTY SPONSORS: 1 OTHER CHAPERONES: 13
TOTAL NUMBER OF PARTICIPATES: _____

MODE OF TRANSPORTATION:

IS DISTRICT TRANSPORTATION NEEDED? ☒ NO ☐ YES, SEE PROCEDURE 09.36 AP.212 ☐ BUS ☐ VAN
☐ CERTIFIED COMMON CARRIER; SPECIFY _____
☒ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) _____

SUPERVISION: (Attach a list of names of adults accompanying students on trip).

Have all chaperones undergone the required AOC check and been designated by the principal/designee to supervise students? ☐ YES ☐ NO

Tabitha Hall

Name of Faculty Sponsor

9-11-22

Date

Trip has been: ☐ approved ☐ disapproved. Reason: _____

J. S.

Signature of Superintendent/Designee

9.19.22

Date

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

FIELD TRIP CHARGES: Bus Limit: 2 persons per seat

\$0.93 per mile

Regular hourly rate for driver; plus overtime

If driver's hours exceed 40 per week.

Overnight lodging: Single room.

Drive time starts 15 minutes before departure and 15 minutes after arrival.

Meals provided by sponsor: ☐ YES ☐ NO

Send copy to lunchroom: ☐ YES ☐ NO

Admission to event provided: ☐ YES ☐ NO

Number of Buses Requested: _____

TRANSPORTATION OFFICE USE ONLY:

Drivers: 1. _____ 2. _____ 3. _____

Local Day Trip

School- Related Student Trip Request Form
SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO THE TRIP

PO #:

SCHOOL: SCES Dance FACULTY MEMBER SPONSORING TRIP: Tabitha Hall ^{volunteer coach}

☐ Classroom Field Trip ☐ Class Trip (whole grade), specify _____
☐ Organization/ Club: _____ ☐ other (athletic, band, etc.) _____

DESTINATION: Cheer Elite Competition ADDRESS: Lexington KY
☐ Out of State ☒ Out of County ☐ within County ☐ Overnight: 0

DATE(S) OF TRIP: 3-18-23 DEPARTURE TIME: _____ RETURN TIME: _____
PURPOSE/ EDUCATION VALUE: _____

SOURCE OF FUNDING FOR TRIP: Fundraising/ Parent Pay
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF INABILITY TO PAY.

BILL TRIP EXPENSES TO:

☐ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☐ BOARD ☐ OTHER: _____
NUMBER OF STUDENTS: 13 FACULTY SPONSORS: 1 OTHER CHAPERONES: 13
TOTAL NUMBER OF PARTICIPATES: _____

MODE OF TRANSPORTATION:

IS DISTRICT TRANSPORTATION NEEDED? ☒ NO ☐ YES, SEE PROCEDURE 09.36 AP.212 ☐ BUS ☐ VAN
☐ CERTIFIED COMMON CARRIER; SPECIFY _____
☒ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) _____

SUPERVISION: (Attach a list of names of adults accompanying students on trip).

Have all chaperones undergone the required AOC check and been designated by the principal/designee to supervise students? ☐ YES ☐ NO

Tabitha Hall
Name of Faculty Sponsor

9-16-22
Date

Trip has been: ☐ approved ☐ disapproved. Reason: _____

J. S.
Signature of Superintendent/Designee 9-19-22
Date

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

FIELD TRIP CHARGES: Bus Limit: 2 persons per seat

\$0.93 per mile

Regular hourly rate for driver; plus overtime

If driver's hours exceed 40 per week.

Overnight lodging: Single room.

Drive time starts 15 minutes before departure and

15 minutes after arrival.

Meals provided by sponsor: ☐ YES ☐ NO

Send copy to lunchroom: ☐ YES ☐ NO

Admission to event provided: ☐ YES ☐ NO

Number of Buses Requested: _____

TRANSPORTATION OFFICE USE ONLY:

Drivers: 1. _____ 2. _____ 3. _____

Local - Day Trip

PO #:

School-Related Student Trip Request Form
SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO THE TRIP

SCHOOL: SCES Dance FACULTY MEMBER SPONSORING TRIP: Tabitha Hall

☐ Classroom Field Trip ☐ Class Trip (whole grade), specify _____
☐ Organization/ Club: _____ ☐ other (athletic, band, etc.) _____

DESTINATION: Eastern High School ADDRESS: 12400 Old Shelbyville Rd. Louisville, KY 40243
☐ Out of State ☒ Out of County ☐ within County ☐ Overnight: _____

DATE(S) OF TRIP: Nov. 19th, 2022 DEPARTURE TIME: _____ RETURN TIME: _____
PURPOSE/ EDUCATION VALUE: Dance competition

SOURCE OF FUNDING FOR TRIP: Fundraising / Parent Pay
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF INABILITY TO PAY.

BILL TRIP EXPENSES TO:

☐ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☐ BOARD ☐ OTHER: _____
NUMBER OF STUDENTS: 13 FACULTY SPONSORS: 1 OTHER CHAPERONES: 13
TOTAL NUMBER OF PARTICIPATES: 13 transportation waivers on file

MODE OF TRANSPORTATION:

IS DISTRICT TRANSPORTATION NEEDED? ☒ NO ☐ YES, SEE PROCEDURE 09.36 AP.212 ☐ BUS ☐ VAN
☐ CERTIFIED COMMON CARRIER; SPECIFY _____
☒ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) _____

SUPERVISION: (Attach a list of names of adults accompanying students on trip).

Have all chaperones undergone the required AOC check and been designated by the principal/designee to supervise students? ☐ YES ☐ NO

Tabitha Hall
Name of Faculty Sponsor

9-16-22
Date

Trip has been: ☐ approved ☐ disapproved. Reason: _____

[Signature]
Signature of Superintendent/Designee

9-19-22
Date

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

FIELD TRIP CHARGES: Bus Limit: 2 persons per seat

\$0.93 per mile

Regular hourly rate for driver; plus overtime

If driver's hours exceed 40 per week.

Overnight lodging: Single room.

Drive time starts 15 minutes before departure and 15 minutes after arrival.

Meals provided by sponsor: ☐ YES ☐ NO

Send copy to lunchroom: ☐ YES ☐ NO

Admission to event provided: ☐ YES ☐ NO

Number of Buses Requested: _____

TRANSPORTATION OFFICE USE ONLY:

Drivers: 1. _____ 2. _____ 3. _____

Local - DAY Trip

PD #: 0

17.00

School- Related Student Trip Request Form SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO THE TRIP

SCHOOL: SCESFACULTY MEMBER SPONSORING TRIP: A. Dunning, Hagman, White, Blumeyer, Dill, Raymer☐ Classroom Field Trip ☒ Class Trip (whole grade), specify 1st Grade☐ Organization/ Club: _____ ☐ other (athletic, band, etc.) _____DESTINATION: KY Derby Museum ADDRESS: 704 Central Ave. Louisville, KY 40208☐ Out of State ☒ Out of County ☐ within County ☐ Overnight: _____DATE(S) OF TRIP: 11-1-22 DEPARTURE TIME: 9:00 RETURN TIME: 2:10PURPOSE/ EDUCATION VALUE: Students will learn math concepts related to the Derby and identify facts about the Derby.SOURCE OF FUNDING FOR TRIP: students/families**NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF INABILITY TO PAY.**

BILL TRIP EXPENSES TO:

☐ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☐ BOARD ☐ OTHER: _____NUMBER OF STUDENTS: 144 FACULTY SPONSORS: 6 OTHER CHAPERONES: _____TOTAL NUMBER OF PARTICIPATES: 150

MODE OF TRANSPORTATION:

IS DISTRICT TRANSPORTATION NEEDED? ☒ NO ☒ YES, SEE PROCEDURE 09.36 AP.212 ☒ BUS ☐ VAN☐ CERTIFIED COMMON CARRIER; SPECIFY Miller Transportation☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) _____

SUPERVISION: (Attach a list of names of adults accompanying students on trip).

Have all chaperones undergone the required AOC check and been designated by the principal/designee to supervise students? ☒ YES ☐ NOName of Faculty Sponsor Angie DunningDate 9-27-22Trip has been: ☐ approved ☐ disapproved. Reason: _____Signature of Superintendent/Designee [Signature]Date 10-3-22

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

FIELD TRIP CHARGES: Bus Limit: 2 persons per seat

\$0.93 per mile

Regular hourly rate for driver; plus overtime

If driver's hours exceed 40 per week.

Overnight lodging: Single room.

Drive time starts 15 minutes before departure and

15 minutes after arrival.

Meals provided by sponsor: ☐ YES ☐ NOSend copy to lunchroom: ☐ YES ☐ NOAdmission to event provided: ☐ YES ☐ NO

Number of Buses Requested: _____

TRANSPORTATION OFFICE USE ONLY:

Drivers: 1. _____ 2. _____ 3. _____