

School Field Trip Packet - Overnight/Greater than 100 miles with District Transportation

Organization: **Marion County Public Schools**Employee: **KIMBERLY HARDIN**Assigned To: **User - kim.hood**[Show History](#)

NOTE: Field trip packets that require Board approval will only be approved at the first regular board meeting each month.

School Professional Leave

03.125 AP.21

* Employee Name	Kim Hardin
* School/Work site	Marion County High School
* Date(s) of leave	March 18-20
* Time of departure	06:00 am
* Destination	Galt House, Louisville, KY
* Purpose/Rationale for attending	Compete in state Governor's Cup for Academic Team
* Number of students involved	11

* Substitute needed (please remember to enter your absence in Aesop, even if a substitute is not required.) No

*Number of days (Avg. \$100 a day)**Substitute code*

* Registration No

*Registration cost**Registration code*

* Mileage No

*Number of miles**Number of days*

* Lodging Yes

Cost per night 581.46*Number of nights* 2*Lodging rate* Conference Rate

* Meals No

*Estimated **total** meal cost**Meals/Mileage/Parking/Lodging Code*

* Grand total of expenses 0

***An overnight stay is required for reimbursement of any meals. Any meal exceeding \$5.00 must be substantiated by an itemized receipt. Maximum allowable food expenditure per day shall be \$40.00 in state and \$46.00 out of state. For lodging to be reimbursed, an original, itemized receipt is required. Registration fees, parking tolls, etc. may be reimbursed with original receipts. Credit card slips, registration forms, or check copies are not accepted as receipts. A Travel Voucher (03.125 AP.22) must be completed after the conference/workshop, etc., to receive reimbursement for actual expenses.**

Notes

Reviewed/Revised: 01/12/2015

School-Related Student Trip Request Form

09.36 AP.21

* Faculty member(s) sponsoring trip	Kim Hardin
* Type of trip (i.e. classroom, organization, club, athletic, band)	competition
* Destination name	Galt House
* Destination address	140 N.4th St. Louisville, KY 40202
* Destination phone	502-589-5200
Lodging name	The Galt House
Lodging address	140 N. 4th St, Louisville, KY 40202
Lodging phone	502-589-5200
* Date(s) of trip	March 18-20
* Time of departure	06:00 am
* Purpose/Educational value	To compete in the state finals for Academic Team
* Source of funding for trip	BOE
<i>No student shall be denied the trip because of the inability to pay.</i>	
* Bill trip expenses to (i.e. Sponsoring organization, school council, Board)	BOE
* Number of students	11
* Number of faculty sponsors	2
* Other chaperones	0
* Total number of participants	11
* Supervision (Attach list of names of students and chaperones)	

bus list 1_7_23.pdf

Added 2/20/2023 9:10:00 AM

[view](#)

Add a File

* Have all chaperones undergone the required records check and been designated by the principal/designee to supervise students? Yes

Reviewed/Revised: 01/12/15

School Bus Request



This authorization for the use of this vehicle is valid for the use of said vehicle as a "School Bus" and for no other purpose.

* Buses needed 1

**If more than one bus is needed, please submit a 'School Bus Request' form for each additional bus.*

* Destination Louisville, KY The Galt House

* Date(s) of trip March 18-20

* Group requesting bus MCHS Academic Team

* Purpose of trip compete in state finals

* Bus pick-up time 06:00 am

* Bus return time 12:20 pm

* When transporting items that cannot be held in lap of students, under storage will be required to store these items. Under storage will be required

* Account to be charged BOE--attention Scott Spalding

[Blank Student List Template](#)

* Faculty supervision will be provided for this trip. At least one member of our faculty will ride in each bus. A copy of the list of pupils that are assigned to ride this particular school bus can be uploaded below. The driver will be given a copy and the school should also keep a copy of all riders on file.

bus list 1_7_23.pdf

Added 2/20/2023 9:11:00 AM

[view](#)

* Employee Signature

Signed: **Kim Hardin**

Stamped: Mon Feb 20 2023 10:12:58 GMT-0500 (Eastern Standard Time); 2/20/2023 9:12:58 AM; 2023-02-20 15:12:58Z; 170.185.150.17; Employee - #368 - KIMBERLY HARDIN

* Principal Signature

Signed: **Robby Peterson**

Stamped: Mon Feb 20 2023 10:26:47 GMT-0500 (Eastern Standard Time); 2/20/2023 9:24:17 AM; 2023-02-20 15:24:17Z; 170.185.150.17; Employee - #371 - JOSEPH PETERSON

* Direct this field trip packet to



* Supervisor Signature

Not Signed

Read-Only

* Field Trip Designee Signature

Not Signed

Read-Only

* Date of Board approval

* Superintendent Signature

Not Signed

Read-Only

This section is to be completed by the Transportation Director.

✿ Bus number

✿ Driver

✿ Driver wage

✿ Transportation Director Signature/Date

This section is to be completed by the driver and filed in the Transportation Director's office upon completion of the above trip.

✿ Ending odometer reading

✿ Beginning odometer reading

✿ Total miles

✿ Number transported

✿ Driver Signature/Date

Approve

Deny