

local  
PO #:

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

SCHOOL: Taylorsville Elem. FACULTY MEMBER SPONSORING TRIP: Melinda Harrelson

☐ Classroom Field Trip ☒ Class Trip (whole grade), specify 5th  
☐ Organization/ Club: \_\_\_\_\_ ☐ other (athletic, band, etc.) \_\_\_\_\_

DESTINATION: Frazier History Museum ADDRESS: \_\_\_\_\_  
☐ Out of State ☒ Out of County ☐ within County ☐ Overnight: \_\_\_\_\_

DATE(S) OF TRIP: April 18, 2023 DEPARTURE TIME: 9:00 RETURN TIME: 1:30  
PURPOSE/ EDUCATION VALUE: "Declaring Your Independence" Aligns w/ 5th grade SS standards SS. 5.5.2.4, 5.5.1.1, 5.5.2.3, 5.5.2.3.1

SOURCE OF FUNDING FOR TRIP: Student \$15  
**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: 96 FACULTY SPONSORS: 5 OTHER CHAPERONES: 6  
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

Melinda Harrelson  
Name of Faculty Sponsor

3-6-23  
Date

Trip has been: ☒ approved ☐ disapproved. Reason: \_\_\_\_\_

[Signature]  
Signature of Superintendent/Designee

3-6-23  
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: 3

**TRANSPORTATION OFFICE USE ONLY:**

Drivers: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

PO #:

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

SCHOOL: Taylorsville Elementary FACULTY MEMBER SPONSORING TRIP: Kindergarten

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

DESTINATION: Louisville Zoo ADDRESS: 1100 Trevilian Way Louisville 40213  
☐ Out of State ☒ Out of County ☐ within County ☐ Overnight: \_\_\_\_\_

DATE(S) OF TRIP: May 12, 2023 DEPARTURE TIME: 9:00am RETURN TIME: 2:00pm  
 PURPOSE/ EDUCATION VALUE: Learn about animal habitats, behaviors, & conservation

SOURCE OF FUNDING FOR TRIP: student 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: 117 FACULTY SPONSORS: 10 OTHER CHAPERONES: 9 70-75  
 TOTAL NUMBER OF PARTICIPATES: @ 197-200

**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

Shannon Buynak  
 Name of Faculty Sponsor

3/3/23  
 Date

Trip has been: ☐ approved ☐ disapproved. Reason: \_\_\_\_\_

[Signature]  
 Signature of Superintendent/Designee

3-20-23  
 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 (Students only)  
 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.

(\$15. per student)  
\$10 admission / \$5 bus

Meals provided by sponsor: ☐ YES ☒ NO  
 Send copy to lunchroom: ☒ YES ☐ NO  
 Admission to event provided: ☒ YES ☐ NO

Number of Buses Requested: 3

**TRANSPORTATION OFFICE USE ONLY:**

Drivers: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_