

STUDENTS

09.36 AP.21

School-Related Student Trip/Vehicle Request Form

SUBMIT THIS FORM TWO WEEKS PRIOR TO THE TRIP.

SCHOOL Gallatin Co. High School FACULTY MEMBER(S) SPONSORING TRIP B. Watkins / R. Riddle
☐ Classroom Field Trip ☒ Class Trip, specify Seniors ☐ Other (athletic, band, if applicable)
☐ Organization/Club Trip, specify _____
 Destination Kings Island Address 6300 Kings Island Dr. Phone 513-754-5700
☒ Out of State ☐ Out of County ☐ Within County mpson, OH 45040
☐ Overnight; give name, address, phone of lodging _____

Date of Request 4/10/23 Date of Trip 5/19/23 Person Requesting R. Riddle
 Departure Time 8:30am Return Time 9:30pm Number of Riders 50-70 Number of Chaperones 2-4

ATTACH LIST OF NAMES OF ADULTS/STUDENTS ON TRIP

Faculty Sponsor Becky Watkins
 (Certified Person Responsible for Student)
 Principal Angela Lewis SBDM Chair _____
 Charged to/Source of Funding _____ Have all chaperones been approved? ☐ Yes ☐ No
 Meals Required: ☐ Sack Lunch ☐ Fast Food ☐ Other _____
 List Special Equipment To Be Transported—Items Which Cannot Be Held In Lap.

Number Of Buses Requested _____ Regular Bus _____ Special Needs Bus _____ Van _____

Ratio of Students to Adults

High School	20 to 1
Middle School	10 to 1
Elementary	5 to 1

*For daily trips, a simple way to estimate cost is \$1/mile and \$20/hour, per bus.

This section to be completed by Transportation/Central Office.

Trip Calculation 252 2.00
 Bus 504 X \$1.00 = \$ 504.00 Mileage Bill to: _____
 Total Miles _____
 _____ X _____ = \$ _____ Driver Rate
 Avg. OT Rate = \$ _____ \$ _____ Total
 # of Buses Approved: 2 Approval of Transportation Director: Dolly Fugate Date 4-13-23
 Acceptance by Driver: _____ Date _____

For overnight and/or out-of-state trips, approval of the Superintendent and Board is required.

Superintendent

Date

Board Chairperson

Date

RELATED PROCEDURES:

09.36 AP.211, 09.36 AP.23

Review/Revised:6/22/09