

Overnight

PO #: \_\_\_\_\_

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

SCHOOL: SCHS FACULTY MEMBER SPONSORING TRIP: April Roberts  
Amanda Vance

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

DESTINATION: FFA Leadership Camp ADDRESS: 111 FFA Camp Rd. Hardinsbur  
 Out of State  Out of County  within County  Overnight: 5/30-6/2 Ki

DATE(S) OF TRIP: 5/30-6/2 DEPARTURE TIME: 8 am RETURN TIME: 2:00 pm  
PURPOSE/ EDUCATION VALUE: State Leadership Camp

SOURCE OF FUNDING FOR TRIP: FCLLA, Parental Support  
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: 6 FACULTY SPONSORS: 2 OTHER CHAPERONES: \_\_\_\_\_  
TOTAL NUMBER OF PARTICIPATES: 8

**MODE OF TRANSPORTATION:**

IS DISTRICT TRANSPORTATION NEEDED?  NO  YES, SEE PROCEDURE 09.36 AP.212  BUS  VAN (Only 1 van because 1 teacher driving personal vehicle)  
 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

April Roberts Name of Faculty Sponsor 3-30-23 Date

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

[Signature] Signature of Superintendent/Designee 4/14/2023 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. \_\_\_\_\_