

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

Organization: **Marion County Public Schools**

Employee: **Makenzie Thomas**

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	Makenzie Thomas
* School/Work site	Marion County High School
* Date(s) of leave	November 16-17
* Time of departure	03:30 pm
* Destination	Murray State University
* Purpose/Rationale for attending	Students will participate in the State Vet Science Career Development Event
* Number of students involved	4

\* Substitute needed (please remember to enter your absence in Aesop, even if a substitute is not required.) Yes

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

*Substitute code* LAVEC

\* Registration No

*Registration cost*

*Registration code*

\* Mileage No

*Number of miles*

*Number of days*

\* Lodging Yes

*Cost per night*

*Number of nights*

*Lodging rate*

\* Meals Yes

*Estimated **total** meal cost*


*Meals/Mileage/Parking/Lodging Code*

\* Grand total of expenses 300

**\*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 Makenzie Thomas  
\* Type of trip (i.e. classroom, organization, club, athletic, band) FFA  
\* Destination name Murray State University  
\* Destination address 2101 College Farm Rd, Murray, KY 42071  
\* Destination phone (270) 809-3125

*Lodging name*

*Lodging address*

*Lodging phone*

\* Date(s) of trip November 16-17, 2023  
\* Time of departure 03:30 pm  
\* Purpose/Educational value  
Students will participate in the State Vet Science Career Development Event

\* Source of funding for trip LAVEC

*No student shall be denied the trip because of the inability to pay.*

\* Bill trip expenses to (i.e. Sponsoring organization, school council, Board) LAVEC

\* Number of students 4

\* Number of faculty sponsors 1

\* Other chaperones 0

\* Total number of participants 5

\* Supervision (Attach list of names of students and chaperones)

Vet Science CDE Field Trip.xlsx  
Added 8/2/2023 9:28:00 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 SUV

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

\* Destination Murray State University

\* Date(s) of trip Nov 16-17, 2023

\* Group requesting bus FFA

\* Purpose of trip Vet Contest

\* Bus pick-up time 03:30 pm

\* Bus return time 05:00 pm

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

\* Account to be charged LAVEC

[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.

Vet Science CDE Field Trip.xlsx  
Added 8/2/2023 9:28:00 AM

[view](#)

\* Employee Signature

Signed:**Makenzie Thomas**  
Stamped:Wed Aug 02 2023 10:28:30 GMT-0400 (Eastern Daylight Time);8/2/2023 9:28:30 AM;2023-08-02 14:28:30Z;170.185.150.17;Employee - #668 - Makenzie Thomas

\* Principal Signature

Signed:**Robby Peterson**  
Stamped:Thu Aug 03 2023 11:08:14 GMT-0400 (Eastern Daylight Time);8/3/2023 10:08:15 AM;2023-08-03 15:08:15Z;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**