

Day Trip

PO #: _____

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

SCHOOL: Taylorville Elementary COUNTY MEMBER SPONSORING TRIP: Mrs. Morris

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

DESTINATION: Devine's Corn Maze & Pumpkin Patch ADDRESS: 623 Talmage - Mayo Rd
 Out of State Out of County within County Overnight: Harrodsburg, KY

DATE(S) OF TRIP: 10/27/23 Rain 10/30/23 DEPARTURE TIME: 9 am RETURN TIME: 7 pm

PURPOSE/ EDUCATION VALUE: Students will learn about plants (parts of & needs) and the life cycle of pumpkins. Plants are a K-science standard.

SOURCE OF FUNDING FOR TRIP: (\$16/student + bus fee) students per student \$5.00 per student \$11.00 total

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: 107 FACULTY SPONSORS: 12 OTHER CHAPERONES: ~80

TOTAL NUMBER OF PARTICIPATES: 119 + chaperones \$11.00 per student

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

Jennifer M. Prash
Name of Faculty Sponsor

8/21/23
Date

Trip has been: approved disapproved. Reason: _____

[Signature]
Signature of Superintendent/Designee

8/21/23
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: _____

TRANSPORTATION OFFICE USE ONLY:

Drivers: 1. _____ 2. _____ 3. _____

Day Trip

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

PO #: _____

SCHOOL: TES FACULTY MEMBER SPONSORING TRIP: Lexas Perry

Classroom Field Trip Class Trip (whole grade), specify Pass+, MSD
 Organization/ Club: _____ other (athletic, band, etc.) _____

DESTINATION: Taylorsville Lake ADDRESS: 1320 Park rd, Mt. Eden Ky
 Out of State Out of County within County Overnight: _____

DATE(S) OF TRIP: 9/28/23 DEPARTURE TIME: 10:00 RETURN TIME: 1:00
PURPOSE/ EDUCATION VALUE: Investigating natural resources and connecting literature to nature.

SOURCE OF FUNDING FOR TRIP: _____
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF INABILITY TO PAY.

BILL TRIP EXPENSES TO:
 SPONSORING ORGANIZATION SCHOOL COUNCIL BOARD OTHER: SPED
NUMBER OF STUDENTS: 13 FACULTY SPONSORS: 6 OTHER CHAPERONES: _____
TOTAL NUMBER OF PARTICIPATES: 19

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

Lexas Perry Name of Faculty Sponsor 8/20/23 Date

Trip has been: approved disapproved. Reason: _____

[Signature] Signature of Superintendent/Designee 8-21-23 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: _____

TRANSPORTATION OFFICE USE ONLY:
Drivers: 1. _____ 2. _____ 3. _____

Day Trip

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

PO #: _____

SCHOOL: TES FACULTY MEMBER SPONSORING TRIP: Lexas Perry

Classroom Field Trip Class Trip (whole grade), specify Pass+ and MSD classes
 Organization/ Club: _____ other (athletic, band, etc.) _____

DESTINATION: Gallrien Farms ADDRESS: _____
 Out of State Out of County within County Overnight: _____

DATE(S) OF TRIP: 10/20/23 DEPARTURE TIME: 9:30 RETURN TIME: 2:00
PURPOSE/ EDUCATION VALUE: Provide students with discovery opportunities involving science, gross motor and social skills.

SOURCE OF FUNDING FOR TRIP: SPED
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF INABILITY TO PAY.

BILL TRIP EXPENSES TO:
 SPONSORING ORGANIZATION SCHOOL COUNCIL BOARD OTHER: SPED
NUMBER OF STUDENTS: 13 FACULTY SPONSORS: 6 OTHER CHAPERONES: _____
TOTAL NUMBER OF PARTICIPATES: 19

MODE OF TRANSPORTATION:
IS DISTRICT TRANSPORTATION NEEDED? NO YES, SEE PROCEDURE 09.36 AP.122 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

Name of Faculty Sponsor: Lexas Perry Date: 8/20/23

Trip has been: approved disapproved. Reason: _____

Signature of Superintendent/Designee: _____ Date: 8/21/23

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. _____

Day Trip

PO #:

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

SCHOOL: TES FACULTY MEMBER SPONSORING TRIP: Lexas Perry

Classroom Field Trip Class Trip (whole grade), specify Pass+, MSD
 Organization/ Club: _____ other (athletic, band, etc.) _____

DESTINATION: Louisville Mega Cavern ADDRESS: 1841 Taylor Ave. Louisville, ky
 Out of State Out of County within County Overnight: _____

DATE(S) OF TRIP: 11/17/23 DEPARTURE TIME: 9:30 RETURN TIME: 2:00
PURPOSE/ EDUCATION VALUE: Social skills practice and sensory input

SOURCE OF FUNDING FOR TRIP: _____
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF INABILITY TO PAY.

BILL TRIP EXPENSES TO:
 SPONSORING ORGANIZATION SCHOOL COUNCIL BOARD OTHER: SPED
NUMBER OF STUDENTS: 13 FACULTY SPONSORS: 6 OTHER CHAPERONES: _____
TOTAL NUMBER OF PARTICIPATES: 19

MODE OF TRANSPORTATION:
IS DISTRICT TRANSPORTATION NEEDED? NO YES, SEE PROCEDURE 09.36 AP.3.2 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

Lexas Perry Name of Faculty Sponsor 8/21/23 Date

Trip has been: approved disapproved. Reason: _____

[Signature] Signature of Superintendent/Designee 8/21/23 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: _____

TRANSPORTATION OFFICE USE ONLY:
Drivers: 1. _____ 2. _____ 3. _____

Day Trip

PO #: _____

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

SCHOOL: TES FACULTY MEMBER SPONSORING TRIP: Lexas Perry

Classroom Field Trip Class Trip (whole grade), specify Pass+, MSD
 Organization/ Club: _____ other (athletic, band, etc.) _____

DESTINATION: Dollar Tree ADDRESS: 565 Taylorsville rd, Taylorsville, KY
 Out of State Out of County within County Overnight: _____

DATE(S) OF TRIP: 12/13/23 DEPARTURE TIME: 10:30 RETURN TIME: 12:30
PURPOSE/ EDUCATION VALUE: Money skills, Life skills

SOURCE OF FUNDING FOR TRIP: _____
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF INABILITY TO PAY.

BILL TRIP EXPENSES TO:
 SPONSORING ORGANIZATION SCHOOL COUNCIL BOARD OTHER: SPED
NUMBER OF STUDENTS: 13 FACULTY SPONSORS: 6 OTHER CHAPERONES: _____
TOTAL NUMBER OF PARTICIPATES: 19

MODE OF TRANSPORTATION:
IS DISTRICT TRANSPORTATION NEEDED? NO YES, SEE PROCEDURE 09.36 AP.3.1 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

Lexas Perry _____
Name of Faculty Sponsor Date 8/20/23

Trip has been: approved disapproved. Reason: _____

[Signature] _____
Signature of Superintendent/Designee Date 8/21/23

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. _____

Day Trip

PO #: _____

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

SCHOOL: TES FACULTY MEMBER SPONSORING TRIP: Lexas Perry

Classroom Field Trip Class Trip (whole grade), specify Passst, MSD
 Organization/ Club: _____ other (athletic, band, etc.) _____

DESTINATION: Defy Trampoline Park ADDRESS: 100 Urton Lane #101
 Out of State Out of County within County Overnight: _____

DATE(S) OF TRIP: 1/26/23 DEPARTURE TIME: _____ RETURN TIME: _____
PURPOSE/ EDUCATION VALUE: Life skills, Gross motor skills, Social Skills

SOURCE OF FUNDING FOR TRIP: _____
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF INABILITY TO PAY.

BILL TRIP EXPENSES TO:
 SPONSORING ORGANIZATION SCHOOL COUNCIL BOARD OTHER: SPED
NUMBER OF STUDENTS: 13 FACULTY SPONSORS: 6 OTHER CHAPERONES: _____
TOTAL NUMBER OF PARTICIPATES: 19

MODE OF TRANSPORTATION:
IS DISTRICT TRANSPORTATION NEEDED? NO YES, SEE PROCEDURE 09.36 AP.12 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

Lexas Perry 8/20/23
Name of Faculty Sponsor Date

Trip has been: approved disapproved. Reason: _____

[Signature] 8/21/23
Signature of Superintendent/Designee 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. _____

Day Trip

PO #: _____

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

SCHOOL: TES FACULTY MEMBER SPONSORING TRIP: Lexas Perry

Classroom Field Trip Class Trip (whole grade), specify Pass+ MSD
 Organization/ Club: _____ other (athletic, band, etc.) _____

DESTINATION: Claudia Sanders ADDRESS: 3202 Shelbyville Rd Shelbyville, Ky
 Out of State Out of County within County Overnight: _____

DATE(S) OF TRIP: 2/23/23 DEPARTURE TIME: 10:30 RETURN TIME: 12:30
PURPOSE/ EDUCATION VALUE: Life skills, money skills, adaptive skills

SOURCE OF FUNDING FOR TRIP: _____
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF INABILITY TO PAY.

BILL TRIP EXPENSES TO:
 SPONSORING ORGANIZATION SCHOOL COUNCIL BOARD OTHER: SPED
NUMBER OF STUDENTS: 13 FACULTY SPONSORS: 6 OTHER CHAPERONES: _____
TOTAL NUMBER OF PARTICIPATES: 19

MODE OF TRANSPORTATION:
IS DISTRICT TRANSPORTATION NEEDED? NO YES, SEE PROCEDURE 09.36 AP. 13 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

Lexas Perry _____
Name of Faculty Sponsor Date

Trip has been: approved disapproved. Reason: _____

[Signature] _____
Signature of Superintendent/Designee Date 8/21/23

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. _____

Day Trip

PO #: _____

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

SCHOOL: TES FACULTY MEMBER SPONSORING TRIP: Lexas Perry

Classroom Field Trip Class Trip (whole grade), specify Pass+ MSD
 Organization/ Club: _____ other (athletic, band, etc.) _____

DESTINATION: King Pin ADDRESS: 9525 Taylorsville rd, Louisville Ky
 Out of State Out of County within County Overnight: _____

DATE(S) OF TRIP: 4/26/23 DEPARTURE TIME: 9:30 RETURN TIME: 1:00
PURPOSE/ EDUCATION VALUE: Life skills, gross motor skill, social skills

SOURCE OF FUNDING FOR TRIP: _____
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF INABILITY TO PAY.

BILL TRIP EXPENSES TO:
 SPONSORING ORGANIZATION SCHOOL COUNCIL BOARD OTHER: SPED
NUMBER OF STUDENTS: 13 FACULTY SPONSORS: 6 OTHER CHAPERONES: _____
TOTAL NUMBER OF PARTICIPATES: 19

MODE OF TRANSPORTATION:
IS DISTRICT TRANSPORTATION NEEDED? NO YES, SEE PROCEDURE 09.36 AP. 12 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

Lexas Perry Name of Faculty Sponsor 8/21/23 Date

Trip has been: approved disapproved. Reason: _____

[Signature] Signature of Superintendent/Designee 8/21/23 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: _____

TRANSPORTATION OFFICE USE ONLY:
Drivers: 1. _____ 2. _____ 3. _____