

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

Organization: **Marion County Public Schools**

Employee: **TRACY COCHRAN**

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	Tracy Cochran
* School/Work site	Calvary Elementary School
* Date(s) of leave	January 15-17, 2024
* Time of departure	03:00 pm
* Destination	State Elementary Beta Convention
* Purpose/Rationale for attending	State Elementary Beta Convention
* Number of students involved	51

\* 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)* 2

*Substitute code* Beta Club

\* Registration Yes

*Registration cost* 30

*Registration code* Beta Club

\* Mileage Yes

*Number of miles* 70

*Number of days* 3

\* Lodging Yes

*Cost per night* 120

*Number of nights* 2

*Lodging rate*

\* Meals Yes

*Estimated **total** meal cost*

*Meals/Mileage/Parking/Lodging Code* Beta Club

\* Grand total of expenses 350

**\*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

Cost will be divided among Beta students, additional cost will, the Beta Account will be used. Please note, I do not know exact number of students yet. I am just filling this out to get it approved. We could have up to 50 students, thats how many are in Beta.

Reviewed/Revised: 01/12/2015

 **School-Related Student Trip Request Form**

09.36 AP.21

- \* Faculty member(s) sponsoring trip Tracy Cochran
- \* Type of trip (i.e. classroom, organization, club, athletic, band) Beta
- \* Destination name State Beta Convention
- \* Destination address 430 W Vine St, Lexington, KY 40507
- \* Destination phone (859) 233-4567
- Lodging name Hilton Downtown
- Lodging address 369 W Vine St, Lexington, KY 40507
- Lodging phone (859) 231-9000
- \* Date(s) of trip Janurary 15-17, 2024
- \* Time of departure 03:00 pm
- \* Purpose/Educational value Participation of Beta Students in the State Convention
- \* Source of funding for trip Beta Funds
- No student shall be denied the trip because of the inability to pay.*
- \* Bill trip expenses to (i.e. Sponsoring organization, school council, Board) Calvary Beta
- \* Number of students 50
- \* Number of faculty sponsors 4
- \* Other chaperones not sure yet
- \* Total number of participants 54
- \* Supervision (Attach list of names of students and chaperones)

Beta Roster for 23\_24.pdf  
Added 9/1/2023 3:00:00 PM

[view](#)

Add a File

- \* Have all chaperones undergone the required records check and been designated by the principal/designee to supervise students? Yes

 **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 1

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

\* Destination Lexington Ky

\* Date(s) of trip January 15-17, 2024

\* Group requesting bus Calvary Beta

\* Purpose of trip Beta Convention

\* Bus pick-up time 03:00 pm

\* Bus return time 02:30 pm

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

\* Account to be charged Beta

[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.

Beta Roster for 23\_24.pdf [view](#)  
Added 9/1/2023 3:01:00 PM

\* Employee Signature

Signed: **Tracy Cochran**  
Stamped: Fri Sep 01 2023 15:56:54 GMT-0400 (Eastern Daylight Time); 9/1/2023 2:56:55 PM; 2023-09-01 19:56:55Z; 170.185.150.17; Employee - #104 - TRACY COCHRAN

\* Principal Signature

Signed: **Paul Terrell**  
Stamped: Tue Sep 05 2023 13:30:27 GMT-0400 (Eastern Daylight Time); 9/5/2023 12:30:27 PM; 2023-09-05 17:30:27Z; 170.185.150.17; Employee - #275 - PAUL TERRELL

\* 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**