School-Related Student Trip Request Form

SUBMIT THIS FORM FOUR (4) WEEKS PRIOR TO TAKING THE TRIP.
SCHOOL District FACULTY MEMBER(S) SPONSORING TRIP Jennifer Starks
Type of Trip (CHECK ONE): □ Over 300 miles □ Under 300 miles □ Cocurricular □ Classroom Field Trip □ Organization/Club Trip □ Other (athletic, band, if applicable
DESTINATION Cayce's Pumpkin Farm Address 153 Formers ville Rd Phone (270) 365-2131
lodging
DATE(S) OF TRIP Foi, Sept 22,2023 DEPARTURE TIME 8.30 am RETURN TIME 1.30pm
Purpose/Educational Value Expanded Core Curriculum for Students with blindness or vis
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.) Expanded Core Corriculum - social development, science, technology, self-deter Source of Funding For Trip IDEA Special Ed for transportation, event is free
AMOUNT OF STUDENT FEE:
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.
BILL TRIP EXPENSES TO: \square SPONSORING ORGANIZATION \square SCHOOL COUNCIL \square BOARD \square OTHER
Number of: students up to 16 Male Students /2 Female Students 4
Number of: students of to 16 Male Students 12 Female Students 4 Mode of Transportation: Is district transportation needed? Ino II yes (see procedure 09.36 AP. 212.) Certificated common carrier; specify
☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)
CERTIFIED CHAPERONES
Mames of chaperones to be provided upon confirmation Classified Chaperones of Student participation
CLASSIFIED CHAPERONES of student participation
Have all chaperones undergone the required records check and been designated by the principal/designee to supervise
students? Yes No Have all students been notified of the rules and regulations regarding
acceptable behavior? Pyes No How have they been notified? 8/25/23
Signature of Faculty Sponsor Date Signature of Principal Date
EMERGENCY REQUESTS DUE TO UNFORSEEN CIRCUMSTANCES THAT MAKE PRIOR BOARD APPROVAL IMPOSSIBLE SHOULD ALSO HAVE THE SIGNATURE OF THE BOARD CHAIRPERSON
Trip has been 🗖 approved 🗆 disapproved. Reason for disapproval
8-25-2003
Signature of Superintendent/Designee Date
Ton Be 1 2 11km2" 8-29-23
Signature of Board Chair Date
For overnight and/or out-of-state trips, approval of the Superintendent and/or Board may be required by policy 09.36.
Palatad Procedures

Related Procedures:

 $09.36~\mathrm{AP.211},\,09.36~\mathrm{AP.212},\,09.36~\mathrm{AP.23}$

School-Related Student Trip Request Form SUBMIT THIS FORM FOUR (4) WEEKS PRIOR TO TAKING THE TRIP. SCHOOL CCHS FACULTY MEMBER(S) SPONSORING TRIP Cole ISOMM. TYPE OF TRIP (CHECK ONE): ☐ Extracurricular Under 300 miles ☐ Cocurricular Over 300 miles ☐ Organization/Club Trip ☐ Other (athletic, band, if applicable ☐ Classroom Field Trip DESTINATION Elicabeth town by ADDRESS ☐ Out of County ☐ Out of State lodging TBD DATE(S) OF TRIP 3/15/24 - 3/10/24 DEPARTURE TIME 3:30 - 3/15/24 RETURN TIME 7:40/24 - 3/14/24 PURPOSE/EDUCATIONAL VALUE BASCHALL GAMES WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.) SOURCE OF FUNDING FOR TRIP BASE ball Bowsters (CC HS) AMOUNT OF STUDENT FEE: NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY. ☐ OTHER BILL TRIP EXPENSES TO: SPONSORING ORGANIZATION SCHOOL COUNCIL □ BOARD NUMBER OF: STUDENTS 20 MALE STUDENTS 20 FEMALE STUDENTS MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? IN 10 1/2 YES (SEE PROCEDURE 09.36 AP. 212.) CERTIFICATED COMMON CARRIER; SPECIFY Bus ☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)_ CERTIFIED CHAPERONES Cole Ison, Peyton Moshier, Tyler Juckett CLASSIFIED CHAPERONES Mitchel Blackmon Have all chaperones undergone the required records check and been designated by the principal/designee to supervise Have all students been notified of the rules and regulations regarding students? Ø Yes □ No How have they been notified? Myed copies acceptable behavior? MYes 🗆 No lov-Signature of Faculty Sponsor EMERGENCY REQUESTS DUE TO UNFORSEEN CIRCUMSTANCES THAT MAKE PRIOR BOARD APPROVAL IMPOSSIBLE SHOULD ALSO HAVE THE SIGNATURE OF THE BOARD CHAIRPERSON Trip has been papproved D disapproved. Reason for disapproval Signature of Superintendent/Designer

For overnight and/or out-of-state trips, approval of the Superintendent and/or Board may be required by policy 09.36.

Related Procedures:

Signature of Board Chair

09.36 AP.211, 09.36 AP.212, 09.36 AP.23

SLODENL				10 10 10 10 10 10 10 10 10 10 10 10 10 1	00 AP.21
	School-Rela	ated Student Ti	ip Request For	·m	
			S PRIOR TO TAKING TI		
SCHOOL_	CCHS	_ FACULTY MEMBER	(s) sponsoring trip	Sam Self	
☐ Over 30	P (CHECK ONE): 0 miles	tion/Club Trip 🖾 Oth	er (athletic, band, if ap	plicable	
☐ Out of S	tate	☐ Within County	☑ Overnight: give	e name, address	, phone of
DATE(S) OF T	TRIP 9/29/23-9/30/23	DEPARTURE TIME	4pm RE	TURN TIME 8	pm
	UCATIONAL VALUE QU				
	DARD IS BEING ADDRESSE				
	UNDING FOR TRIP Volley STUDENT FEE: N/A				
	NO STUDENT SHALL BE	E DENIED THE TRIP BE	CAUSE OF AN INABILIT	Y TO PAY.	
BILL TRIP EX	KPENSES TO: ☑ SPONSORING	ORGANIZATION	SCHOOL COUNCIL	□ BOARD	□ OTHER
Number of:	STUDENTS 12 MAI	LE STUDENTS	FEMALE STU	DENTS 12	<u>In</u> sert text here
Mode of Tr	ANSPORTATION: IS DISTRICT	TTRANSPORTATION N	EEDED? INO I	YES (SEE PROCE	DURE 09.36
	PRIVATE VEHICLE, IF ALLO CHAPERONES Sam Self,				
CLASSIFIED	CHAPERONES		- A A A A A A A A A A A A A A A A A A A		
Have all chap students? ☑ acceptable be	perones undergone the require Yes \(\sim \) No ehavior? \(\sim \) Yes \(\sim \) No	ed records check and be Have all students be How have they been	een designated by the peen notified of the run notified? Signed	orincipal/designee les and regulation paper copies	to supervise ns regarding
amont	tu Moll	9/12/23	Hun Ond	4 9.	12.23
Signature of	Faculty Sponsor	Date	Signature of Princip	oal I	Date
EMERGEN APPROVAL	CY REQUESTS DUE TO LIMPOSSIBLE SHOULD	UNFORSEEN CIRC ALSO HAVE THE S	CUMSTANCES THA IGNATURE OF THI	T MAKE PRICE BOARD CHAI	DR BOARD IRPERSON
Trip has been	approved disapproved.	Reason for disapproval			and the same of th
	Clan Jung	pl		9-12-2027	
Sign	nature of Superintendent/Design	ee		Date	

For overnight and/or out-of-state trips, approval of the Superintendent and/or Board may be required by policy 09.36.

Related Procedures:

Signature of Board Chair

09.36 AP.211, 09.36 AP.212, 09.36 AP.23

Review/Revised:11/21/13

Date

STUDENTS

RISING SUN Conference 09.36 AP.21

School-Related Student Trip Request Form

	SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO TAKING THE TRIP.
	SCHOOL* HIGH SCHOOL FACULTY MEMBER(S) SPONSORING TRIP VICTORIA MONON
	TYPE OF TRIP (CHECK ALL THAT APPLY): JOLOO JUNDYSKI
	Over 300 miles Under 300 miles Co curricular Matrea Nyatt
	Classroom Field Trip Organization/Club Trip Other (othletic band if all the control of the contr
	DESTINATION ROTT WORV PEA ADDRESS HOVELDS PHONE-DESTINATION 270-7510, 2251
	DESTINATION KONTUCKY PFA ADDRESS HOVEL PROMISE PHONE-DESTINATION 270-756-236 Out of State Out of County Within County Overnight: give name, address, phone of lodging
	COMP of a silver
	DATE(S) OF TRIP 9/16/23 -9/16/23 DEPARTURE TIME 1:03 PM RETURN TIME 3:00 PM
	START END (SELECT AM OR PM FROM DRAPHO OF THE OR THE OF THE OR THE OF THE OF THE OR THE OF THE OR THE OF THE OR THE OF THE OR THE OR THE OF THE OR THE OF THE OR TH
,	PURPOSE/EDUCATIONAL VALUE TO BOTTLY PORTE IN STUDENT ICACEPS P. B. TEAM BUILDING
8	EF 2 Demonstrate effective team skills leg. setting goals. listening, following source of funding for trip cuts for safe work conflict resolution. etc.)
	NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.
I	BILL TRIP EXPENSES TO: M SPONSOPPING OPERATED THE TRIP BECAUSE OF AN INABILITY TO PAY.
ľ	SILL TRIP EXPENSES TO: SPONSORING ORGANIZATION SCHOOL COUNCIL BOARD OTHER
N	WODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? NO YES (SEE PROCEDURE 09.36 AP. 212.) DISTRICT (CERTIFICATED COMMON CARRIER; SPECIFY PRIVATE VEHICLE, IF ALL OWER BY BOLLOW SPECIFICATION OF SPECIFIC SPECIFI
<u>.</u>	CERTIFICATED COMMON CARDON TATION NEEDED? IN NO X YES (SEE PROCEDURE 09.36 AP. 212.)
	PRIVATE VENICLE IN ALL CHIEFY (Choo! VANS
	PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) Certified chaperones Matter Wyat, Nctoria Monon. or Jake Javorski
C	Cassified chaperones N/A
	Tave all chaperones undergone the required records check and been designated by the principal/designee to supervise students? Yes No
H	lave all students been notified of the rules and regulations regarding acceptable behavior? X Yes No
H	low have they been notified? CODE OF acceptable behavior and permission slip
	, at the same
	VV
	Mattle mohon X form Knight
	Faculty/Sponsor Signature Principal Signature
	Principal Signature Principal Signature
Tr	ip has been approved disapproved. Reason for disapproval
	Chirty 8-7-2007 Tombell "Mme" 8-30203
	Company 8.10 ms
	Tombell when y a-some
	303033
Fo	r overnight and/or out-of-state trips, approval of the Superintendent and/or Board may be required by policy 09.36.
_	F A Francisco MVI

owner bound ab busines!

School-Related Student Trip Request Form

	SUBMIT THIS FORM FOUR (4) WEEKS PRIOR TO TAKING THE TRIP.	
SCHOOL	CCHS FACULTY MEMBER(S) SPONSORING TRIP Sam	Self
TYPE OF TRIP	MP (CHECK ONE):	
☐ Over 300 ☐ Classroom DESTINATION	00 miles	
☐ Out of St lodging	State ☑ Out of County ☐ Within County ☑ Overnight: give name, a Sleep Inn & Suites 350 Dohoney Trace Columbia, KY 42728	ddress, phone of
DATE(S) OF T	TRIP September 8-9, 2023 DEPARTURE TIME 4pm RETURN TIME	<u> 10pm</u>
Purpose/Edu	DUCATIONAL VALUE Adair County Classic Volleyball Tournament	
	NDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO A	ATHLETIC TRIPS.)
Source of fi	FUNDING FOR TRIP CCHS Volleyball Boosters	
AMOUNT OF S	F STUDENT FEE: N/A	
	NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.	
BILL TRIP EXI	EXPENSES TO: $oxtimes$ SPONSORING ORGANIZATION $oxdim$ SCHOOL COUNCIL $oxdim$ BOAR	D OTHER
Number of:	F: STUDENTS 13 MALE STUDENTS 0 FEMALE STUDENTS 1	3
	RANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? \square NO $oxdimes$ YES (SEE I) CERTIFICATED COMMON CARRIER; SPECIFY	
	☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)	
CLASSIFIED C	CHAPERONES T'ana Dixon	
students? Y acceptable bel	aperones undergone the required records check and been designated by the principal/de Yes □ No Have all students been notified of the rules and regonated by the principal/de How have they been notified? Paper copies sent how 8/12/23	gulations regarding
Signature of	of Faculty Sponsor Date Signature of Principal	Date
EMERGENO APPROVAL	NCY REQUESTS DUE TO UNFORSEEN CIRCUMSTANCES THAT MAKE AL IMPOSSIBLE SHOULD ALSO HAVE THE SIGNATURE OF THE BOARD	PRIOR BOARD CHAIRPERSON Insert tex
Trip has been	approved disapproved. Reason for disapproval	
	Clongedia 8-14-	
	gnature of Superintendent/Designee Date	·
	OM BLOO 'KNe' S-1' gnature of Board Chair Date	<u>+ 33</u>
i	rernight and/or out-of-state trips, approval of the Superintendent and/or Board may be required by	y policy 09,36.

Related Procedures:

09.36 AP.211, 09.36 AP.212, 09.36 AP.23

Review/Revised:11/21/13

amergency approved

SchoolRelated Student Trip Request Form

244	
SCHOOL TRIP	SUBMIT THIS FORM FOUR (4) WEEKS PRIOR TO TAKING THE TRIP.
□ Out of State	Under 300 miles Cocurricular Extracurricular Trip Organization/Club Trip Other (athletic, band, if applicable Trace Golf Address 1275 Fagle Dr. PHONE 1 (646) 783-9973 Out of County Within County Overnight: give name, address, phone of Fant Suites; 2650 Ky-801 Morchard Ky 40351; (606) 462-2141
DATE(S) OF TRIP 9/1 PURPOSE/EDUCATION.	1-9/2 DEPARTURE TIME 2:30-3:00 RETURN TIME 8:00 pm
	BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)
SOURCE OF FUNDING	
AMOUNT OF STUDENT	
BILL TRIP EXPENSES T NUMBER OF: STUDENT MODE OF TRANSPORT	FATION: IS DISTRICT TRANSPORTATION NEEDED? ON YES (SEE PROCEDURE 09.36 AP.
□ PRIVAT	TED COMMON CARRIER; SPECIFY
CERTIFIED CHAPERO	NES Austin Knight
CLASSIFIED CHAPERO	ones N/A
Signature of Paculty EMERGENCY REC	Have all students been notified of the rules and regulations regarding How have they been notified? A ALLAS Sponsor Date Signature of Principal Date OUESTS DUE TO UNFORSEEN CIRCUMSTANCES THAT MAKE PRIOR BOARD SIBLE SHOULD ALSO HAVE THE SIGNATURE OF THE BOARD CHAIRPERSON
Trip has been approv	red
Signature of	Superintendent/Designee Board Chair Board chair Board chair Board chair Board may be required by policy 09.36.
RELATED PROCED	URES:
09.36 AP.211	, 09.36 AP.212, 09.36 AP.23
360 15	Review/Revised:11/21/13
	Vehicle Request Form
School HHS	A 14 14 14

Umergency approval

School-Related Student 111p Request Form
SUBMIT THIS FORM FOUR (4) WEEKS PRIOR TO TAKING THE TRIP.
SCHOOL HUS FACULTY MEMBER(S) SPONSORING TRIP LISE TO herte
TYPE OF TRIP (CHECK ONE):
☐ Over 300 miles ☐ Under 300 miles ☐ Cocurricular ☐ Extracurricular ☐ Classroom Field Trip ☐ Organization/Club Trip ☐ Other (athletic, band, if applicable
DESTINATION PAC - Inside CCMS Address 215 Klass (we) Phone 270 887-7113
Out of State Out of County Within County Overnight: give name, address, phone of
Out of State Out of County Dept 10:50? Return Time Nov. 28. Jan 22, 26. 36, March 26, 20, 15
DATE(S) OF TRIP Au 29 Sept 25 Octo DEPARTURE TIME 10:50 RETURN TIME 12:30 ?
PURPOSE/EDUCATIONAL VALUE Nov. 28. Jan 27, 86.26, March 26, Apr, 15
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)
SOURCE OF FUNDING FOR TRIP SULFIRMENDA A A MY.
Source of Funding for trip Superintendent of C Amount of Student Fee:
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.
BILL TRIP EXPENSES TO: SPONSORING ORGANIZATION SCHOOL COUNCIL BOARD OTHER NUMBER OF: STUDENTS MALE STUDENTS FEMALE STUDENTS
Mode of Transportation: is district transportation needed? no yes (see procedure 09.36 ap. 212.) Certificated common carrier; specify
☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)
CERTIFIED CHAPERONES
CLASSIFIED CHAPERONES
Have all chaperones undergone the required records check and been designated by the principal/designee to supervise students? Yes No Have all students been notified of the rules and regulations regarding
acceptable behavior? \(\subseteq \text{ Yes} \subseteq \text{ No} \\\ \text{How have they been notified?} \)
Signature of Faculty Sponsor Date Aug. 11 1 3 Signature of Principal Date
EMERGENCY REQUESTS DUE TO UNFORSEEN CIRCUMSTANCES THAT MAKE PRIOR BOARD APPROVAL IMPOSSIBLE SHOULD ALSO HAVE THE SIGNATURE OF THE BOARD CHAIRPERSON
Trip has been approved disapproved. Reason for disapproval
1/25-16-1 G11:00
Signature of Superintendent Designed Tion Bl O O King Y 8-17-24
Tom Be 00 "King" 8-17-24
Signature of Board Chair Date
For overnight and/or out-of-state trips, approval of the Superintendent and/or Board may be required by policy 09.36.

Related Procedures:

09.36 AP.211, 09.36 AP.212, 09.36 AP.23

Review/Revised:11/21/13

Unergency approved

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	O Cher 300 miles O Under 500 miles
	O Classroom Field Irin O Desantation Club Tris O Cuber Cables hand it was been been
	DESTINATION FFH Loudenship Thains Center 111 Elle Cup FFH Confirme 270 - 750 - 2301
- 1	O Out of State D'Out of County O William Commun.
	lodging Comp Chains Deferting Time 2 PM Return Time Sept. 16 3 pm Lerose/For Callonal Value Dandlera L. No. December 200 1 19 19 19 19 19 19 19 19 19 19 19 19 1
I	DATE (S) OF TRIP Sopt 13th DEFARTURE TIME 2 PM RETURN TIME SOW, ILE 3 ON
-1	The deceleration of the second
V	WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.) CLOCKLOSHED CLUCKOPMENT OURCE OF FUNDING FOR TRIP MOUNT OF STUDENT FEE: S 20.00
9	OURCE OF FUNDING FOR TRIP
٠.	MOUNT OF STUDENT FEE: 5 20 00
	NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.
B	ILL TRIP EXPENSES TO: O SPONSORING ORGANIZATION O SCHOOL COUNCIL O BOARD O OTHER
N	IMBER OF: STUDENTS 2 MAIE STUDENTS 2
N	ODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? ONO SYES (SEE PROCLINGE 89.36 sp. 212.) **CERTIFICATED COMMON CARRIER; SPECIFY / 4/2
	O PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)
C	ERTIFIED CHAPERONES Gulu Gilliam
C	ASSIFIED CHAPERONES
113	ve all chaperones undergone the required records check and been designated by the principal designee to supervise
sti	dents? OYes O No Have all students been notified of the rules and regulations regarding
4c	ceptable behavior? 9 yes O No. How have they been indiffied. (4)
X	ulie Hillan 7/27/23 Yenry Knight
1	gnature of Faculty Sponsor Date Signature of Principal Date
En Al	IERGENCY REQUESTS DUE TO UNFORESEEN CIRCUMSTANCES THAT MAKE PRIOR BOARD PROVAL IMPOSSIBLE SHOULD ALSO HAVE THE SIGNATURE OF THE BOARD CHAIRPERSON
	p has been Qapproved O disapproved Reason for disapproval
_	
	Claret Lycens
	Signature of Superimendent Designee Date
	Signature of Board Chair 8-30-33
	For overnight and or out-of-state trips, approval of the Superintendent and or Board may be required by policy 09.36.
₹E	LATED PROCEDURES:
	26 AP 211 00 26 AP 212 00 27 AP 22

09||36 AP.211, 09.36 AP.212, 09.36 AP.23

Review Revised: 11-21-13

Page 1 of 1

comerfered approved

School-Related Student Trip Request Form
SUBMIT THIS FORM FOUR (4) WEEKS PRIOR TO TAKING THE TRIP.
SCHOOL FACULTY MEMBER(S) SPONSORING TRIP KIM Batts
Type of Trip (Check one): Over 300 miles Under 300 miles Cocurricular
☐ Classroom Field Trip ☐ Organization/Club Trip ☐ Other (athletic, band, if applicable
DESTINATION LOUISVIlle, KY Frankfort ADDRESS 830 Phillip (capital PHONE 502) 367-225
Out of State Pout of County Within County Overnight: give name, address, phone of lodging Crowne Plaza 830 Phillips Lane, Louisville, Ky 40209
DATE(S) OF TRIP 1 28 23 - 12/1123 DEPARTURE TIME 4:00 pm RETURN TIME 3 pm
PURPOSE/EDUCATIONAL VALUE Debate, Public Speaking, How govt. Work
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)
Source of Funding For TRIP Bysing - Board School (HHS KYA
AMOUNT OF STUDENT FEE: \$450.00
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.
BILL TRIP EXPENSES TO: PONSORING ORGANIZATION SCHOOL COUNCIL BOARD OTHER
Number of: students 50 Male Students 25 Female Students 35
Mode of Transportation: is district transportation needed? ☐ no ☐ Yes (see procedure 09.36 ap. 212.)☐ Certificated common carrier; specify
☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)
CERTIFIED CHAPERONES Lester Buckner, Amy Buckner
Certified Chaperones KIM Batts, Jennifer
Have all chaperones undergone the required records check and been designated by the principal/designee to supervise
students? Types II No. Have all students been notified of the rules and regulations regarding
acceptable behavior? Tyes \(\text{No} \) How have they been notified? In writing + yer bal
Signature of Faculty Sponsor Date Signature of Principal Date
EMERGENCY REQUESTS DUE TO UNFORSEEN CIRCUMSTANCES THAT MAKE PRIOR BOARD APPROVAL IMPOSSIBLE SHOULD ALSO HAVE THE SIGNATURE OF THE BOARD CHAIRPERSON
Trip has been papproved disapproved. Reason for disapproval
1/11 Juni 9-7-2023
Signature of Superintendent/Designee Date
Signature of Superintentes 2 esignee
Signature of Board Chair Date
For overnight and/or out-of-state trips, approval of the Superintendent and/or Board may be required by policy 09.36.

Related Procedures:

09.36 AP.211, 09.36 AP.212, 09.36 AP.23

SCHOOL: HHS	FACILIY	MEMBER SPONSORING	GERIP: William	Mallor
Type of Trip (Check One):				
O Over 300 miles BUT	ider 300 miles	O Co-curricular	O Eztralumilul	el.
O Classroom Field Trip O Or	ganization Club Trip	O Other (athletic, bar	nd. if applicable)	
DESTINATION Haidin Co Ext.	Office ADDRESS	Elizabethton	PHINE	
O Out of State Out of Con	uhty O Within Co	unty O Overnigh	nt give name, addre-	rs. phone of
Daniel True Mat 19th	DEPARTIRE	TIME LE 143 AM	RETURN TIME	.OBPIN
	and Mara	MAI DONG GRANA	J \n	
WHAT STANDARD IS BEING ADD Cattle tunding of Trip Source of funding for Trip AMOUNT OF STUDENT FEE: S	RESSED BY TAKING	HIS IRIP? (DOES	SOT APPLY TO VIHI	FIR TRIPS.)
FOLDER OF FUNDING FOR TRIP	4HS Nov	0		
AMOUNT OF STEIDENT FEF: S	120.00			
AMOUNT OF STUDENT INDES	ALL BE DENIFD THE I	DIDDECTISE OF INC	SARH HAY TO PAY.	
BILL TRIP EXPENSES TO: O SPONS	ALL BE DEATH THE I	O SCHOOL COL	SCH OBOARD	OOTHER
NUMBER OF: STÜDENTS 7	MALE STIDENTS T	TALL FINE	ESTUDENTS TBA	
MODE OF TRANSPORTATION: IS DI	MALE STUDENTS	UN VENEDA U VO	CONSISTE PROCEDURE	09 36 (P. 212.)
MODE OF TRANSPORTATION: IS DI	STRICT TRANSPORTA IN CARRIER: SPECIFY	July Will	ram	
O PRIVATE VEHICLE, IF AL	OWED BY POLICY: SE	ECIFY DRIVER(S)		
CERTIFIED CHAPERONES Quili	hilliam)		-
CERTIFIED CHAPERONES STOOM				
CLASSIFIED CHAPERONES MA				
Have all chaperones undergone the	required records check	and been designated	by the principal designe	ee to supervise
students? O'Yes O No	Have all stu	dents been/dollied 0	I the tales and resoral	ions treations
acceptable behavior? A yes O No	How have th	ey been you fied? Co	da of Conduct	9-11-201
July Billian	-	May	MUU	Date 0-0
Signature of Faculty Sponsor	Date	Signature o	r Incipal	1.74(0
EMERGENCY REQUESTS DU APPROVAL IMPOSSIBLE SHO	E TO UNFORESEE	N CIRCUMSTANC THE SIGNATURE (ES THAT MAKE PR OF THE BOARD CH	IOR BOARD AIRPERSON
	proved Reason for disap			
trib um casa as alti-		and the second s	and the second s	
Chan	Bur hast	_	9-11-	ros
Signature of Superintendent	Besignee /		* Date	
		- Agent and a second	D	
Signature of Board Chair			Date sand may be required by the	policy 09.36
For overnight and or out-of-state	trips, approval of the Si	iperintendent and or Bo	Munimus ce reduiteu as b	Direct 0712 04

RELATED PROCEDURES:

09.36 AP.211, 09.36 AP.212, 09.36 AP.23

School-Related Student 111p Request Form
SUBMIT THIS FORM FOUR (4) WEEKS PRIOR TO TAKING THE TRIP.
SCHOOL HHS FACULTY MEMBER(5) SPONSORING TRIP Acres Hutch So
Over 300 miles Under 300 miles Cocurrentar Extracurricular
DESTINATION Consville, KY ADDRESS 1001 Fairbale Rephone 502 485 82
Out of State Out of County Within County Devernight: give name, address, phone of lodging confoct In Shephers :: Louist' 10
DATE(S) OF TRIP 9/23 ~ Q /24 DEPARTURE TIMES 9:00 AM RETURN TIME 124 // 00
PURPOSE/EDUCATIONAL VALUE Soccer Toursenet
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)
Source of Funding for Trit Boy's Societ SAF
AMOUNT OF STUDENT FEE:
NO STUDENT SMALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.
BILL TRIP EXPENSES TO: DSPONSORING ORGANIZATION SCHOOL COUNCIL. BOARD OTHER
NUMBER OF: STUDENTS 18 MALE STUDENTS FEMALE STUDENTS
Mode of Transportation: is district transportation needed? ☐ NO ☐ YES (SEE PROCEDURE 09.36 AP. 212.)☐ CERTIFICATED COMMON CARRIER; SPECIFY
☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)
CERTIFIED CHAPERONES AGROO HETChison & Jarles EUS
CLASSIFIED CHAPERONES
Have all chaperenes undergone the required records check and been designated by the principal designee to supervise
students? Wes No Have all students been notified of the rules and regulations regarding acceptable behavior? Wes No How have they been notified?
acceptable dellavior. It takes - 9/4/22 / Loud H (0.11) 95 202
Signature of Faculty Sponsor Date Signature of Frincipal Date
EMERGENCY REQUESTS DUE TO UNFORSEEN CIRCUMSTANCES THAT MAKE PRIOR BOARD APPROVAL IMPOSSIBLE SHOULD ALSO HAVE THE SIGNATURE OF THE BOARD CHAIRPERSON
Trip has been approved I disapproved Reason for disapproval
9-7-20am
Signature of Superintendent Designee Date
Signature of Board Chair Date
For overnight and/or out-of-state trips, approval of the Superintendent and/or Board may be required by policy 09.36

Related Procedures:

09.36 AP.211, 09.36 AP.212, 09.36 AP.23

School-Related Student Trip Request Form
SUBMIT THIS FORM FOUR (4) WEEKS PRIOR TO TAKING THE TRIP.
SCHOOL HMS + MILLONDON FACULTY MEMBER(S) SPONSORING TRIP BOHNEY (ANS) TYPE OF TRIP (CHECK ONE):
Over 300 miles Under 300 miles Cocurricular Extracurricular Classroom Field Trip Organization/Club Trip Other (athletic, band, if applicable DESTINATION LOUISVILLE, KY/COADDRESS 1830 Phillip Phillip Louisville, Ky/CoADDRESS 1830 Phillip Phillip Phillip Phillip Phillip Phillip Phillip Phillip Phill
Out of State Dout of County Within County & Overnight: give name, address, phone of lodging Counce Plaza 830 Phillips Lane Louisville, KY 40209
DATE(S) OF TRIP 11/15/03-11/18/36 PARTURE TIME 4:00 pm RETURN TIME 3 pm
PURPOSE/EDUCATIONAL VALUE Debate, Public Speaking, How government wo
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)
Source of Funding for trip Busing - Board/School / HMS KYA AMOUNT OF STUDENT FEE: # 450,00
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.
BILL TRIP EXPENSES TO: SPONSORING ORGANIZATION SCHOOL COUNCIL BOARD OTHER
NUMBER OF: STUDENTS 10 MALE STUDENTS 7 FEMALE STUDENTS 3
Mode of Transportation: is district transportation needed? I no Yes (see procedure 09.36 ap.212.) I Certificated common carrier; specify
CERTIFIED CHAPERONES BOTTONEY CANSIER, Alysa Biley,
CLASSIFIED CHAPERONES
Have all chaperones undergone the required records check and been designated by the principal/designee to supervise students? Yes \(\) No Acceptable behavior? \(\) Yes \(\) No Have all students been notified of the rules and regulations regarding the principal of the rules and regulations regarding the rules are required to the rules and regulations regarding the rules are required to the rules and regulations regarding the rules are required to the rules and regulations regarding the rules are required to the rules and regulations regarding the rules are required to the rules and regulations regarding the rules are required to the rules and regulations regarding the rules are required to the rules are rules are required to the rules are rule
EMERGENCY REQUESTS DUE TO UNFORSEEN CIRCUMSTANCES THAT MAKE PRIOR BOARD APPROVAL IMPOSSIBLE SHOULD ALSO HAVE THE SIGNATURE OF THE BOARD CHAIRPERSON
Trip has been 🛮 approved 🗆 disapproved. Reason for disapproval
Signature of Superintendent/Designee Date
Signature of Board Chair Date
For overnight and/or out-of-state trips, approval of the Superintendent and/or Board may be required by policy 09.36.

RELATED PROCEDURES:

09.36 AP.211, 09.36 AP.212, 09.36 AP.23