

PO#:

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

SCHOOL: Taylorville Elementary School FACULTY MEMBER SPONSORING TRIP: _____

☐ Classroom Field Trip ☒ Class Trip (whole grade), specify 4th Grade
☐ Organization/ Club: _____ ☐ other (athletic, band, etc.) _____

DESTINATION: Old Fort Harrod State Park ADDRESS: 100 South College St. Harrodsburg, KY 40330
☐ Out of State ☒ Out of County ☐ within County ☐ Overnight: _____

DATE(S) OF TRIP: 10/25/2023 DEPARTURE TIME: 9:00 RETURN TIME: 2:00

PURPOSE/ EDUCATION VALUE: History enrichment - Kentucky's First Permanent Settlement

SOURCE OF FUNDING FOR TRIP: Students \$4.00 Adults \$6.00 Bus \$5.00 Total \$9.00 per student
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: 121 FACULTY SPONSORS: 6 OTHER CHAPERONES: _____
TOTAL NUMBER OF PARTICIPATES: 127

MODE OF TRANSPORTATION:
IS DISTRICT TRANSPORTATION NEEDED? ☐ NO ☒ YES, SEE PROCEDURE 09.36 AP 2023 ☒ 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 AOE check and been designated by the principal/designee to supervise students? ☐ YES ☐ NO

Name of Faculty Sponsor

Date

Trip has been: ☒ approved ☐ disapproved. Reason: _____

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: 3

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