Section 1 (To be completed by requestin for the event)	g organization – Incomplete forms will b	e returned, causing a delay in scheduling transportation		
•	Date of Request: 1016	e of Event: \\\\\24		
	Organization: School: South Tod	ld Elementary		
Number of Passengers				
Type of Trip (Check One)				
☐ In-County Instructional	□ In-County Athletic	□ Other: (Explain In Detail)		
Out-of-County Instructional □ Out-of-County Athletic				
□ Out-of-State Instructional	□ Out-Of-State Athletic			
Destination (Event, City, and State): Ch	ristian County (	Public Library, Hopkinsv Ky		
Planned Stops To and From: None	•	KA		
Departing Location:South Todd Elementary		'e' ~		
Returning Location: South Todd Elementary	1111124	4.00am		
Chaperone/s: Chaperone's Phone #: 12:00PM Special Requests (Check One)  Chaperone's: Chaperone's Phone #: 12:00PM Special Requests (Check One)				
□Van	□ Handicap Access	⊡ Other: (Explain In Detail)		
If requesting the Van, has the person driving been certified and approved to drive? □Yes □No (Check One)				
Person Driving Van: N/A	Trip Requested By: Steve	e Higgins		
Organization Responsible for Payment				
Approval of Site Based Council Representa	itive Jennife Bund	Date: 10-16-23		
Section 2	DISTRICT USE ONLY			
Approval of District Representative		Date:		
DRIVER – TURN THIS FORM IN WITH TIMESHEETS Section 3				
Date/Time of Departure:	Odered 20 4			
Date/Time of Return:	Odometer Start:			
I hereby certify that the above information is	Odometer End:			
Driver Signature	,	P. de		
		Date:		

Date:\_\_\_

Driver Comments: Click here to enter text.

Coach or School Representative Signature

Section 1 (To be completed by requesting organization - Incomplete forms will be returned, causing a delay in scheduling transportation for the event) Date of Request: 10 30 23 Date of Event: 12 13 23 School: South Todd Elementary Organization: Number of Passengers Type of Trip (Check One) XIn-County Instructional ☐ In-County Athletic ☐ Other: (Explain In Detail) ☐ Out-of-County Instructional ☐ Out-of-County Athletic Out-of-State Instructional ☐ Out-Of-State Athletic Destination (Event, City, and State): Hearthstone Elkton Ky + Rotary (Milliken Community House)
Planned Stops To and From: None Hearthstone @ 10:45 Milliken @ 1140 Date of Departure: Time of Departure: 12|13|23 10:30

Date of Return: Time of Return: 12|13|23 12:30? **Departing Location: South Todd Elementary** Returning Location: South Todd Elementary Chaperone's: \_Chaperone's Phone #: En'ca Skipworth-Special Requests (Check One) □Van ☐ Handicap Access ☐ Other: (Explain In Detail) If requesting the Van, has the person driving been certified and approved to drive? 

Yes ☐ No (Check One) Person Driving Van: N/A Trip Requested By: Organization Responsible for Payment Approval of Site Based Council Representative DISTRICT USE ONLY Section 2 Approval of District Representative **DRIVER – TURN THIS FORM IN WITH TIMESHEETS** Section 3 Date/Time of Departure: **Odometer Start:** Date/Time of Return: Odometer End: I hereby certify that the above information is correct to the best of my knowledge. **Driver Signature** Date: Driver Comments: Click here to enter text. Coach or School Representative Signature Date:

Section 1 (To be completed by requesting for the event)	organization – Incomplete forms will be returned,	causing a delay in scheduling transportation
	Date of Request: (0 30 23 Date of Event:	11/10/23
	Organization: School: South Todd Elemen	tary
	Number of Passengers 148	
Type of Trip (Check One)		
Aln-County Instructional	☐ In-County Athletic	☐ Other: (Explain In Detail)
☐ Out-of-County Instructional	☐ Out-of-County Athletic	
☐ Out-of-State Instructional	☐ Out-Of-State Athletic	
Destination (Event, City, and State): TCC	CHS EUCTON KY	
Planned Stops To and From: None		D == #2
Departing Location:South Todd Elementary	Date of Departure: Time of Denarture:	unload at Door #2
Returning Location: South Todd Elementary		
Chaperone/s: Chaperone's Phone #: Rachel Meyer 270 Special Requests (Cheek One)	11/10/23 10:00 604-2272 Miranda Mans	freld (270) 421-4750
□Van	☐ Handicap Access	Other: (Explain In Detail)
If requesting the Van, has the person driving	been certified and approved to drive?   Yes	□No (Check One)
Person Driving Van: N/A	Trip Requested By:	
Organization Responsible for Payment	30E	1 1
Approval of Site Based Council Representat	ive Jennifer Oile	Date: 10 30 23
	DISTRICT USE ONLY	
Section 2		
Approval of District Representative		Date:
Section 3	<u>DRIVER – TURN THIS FORM IN WITH TIMES</u>	SHEETS .
Date/Time of Departure:	Odometer Start:	
Date/Time of Return:	Odometer End:	
I hereby certify that the above information is		
	outlock to the best of my knowledge.	Date:
Driver Comments: Click here to enter to		A MAN I STATE OF THE PARTY OF T
		Date:

Section 1 (To be completed by requesting organization – Incomplete forms will be returned, causing a delay in scheduling transportation for the event)

Date of Request: 10/31/2023	Date of Event:	12/12/2023		
Organization: School: Sc	outh Todd Eleme	entary		
Number of Pas	sengers 39			
☐ In-County		☐ Other: (Explain In Detail) Choirs singing for Todd County Retired Teachers Association		
☐ Out-of-County Athletic				
☐ Out-Of-State	Athletic			
on Baptist Building, Elkton, KY				
y Central High School				
ry Date of Departure: 12/12/20	23 Time of Depar	ture: 11:45 am		
Returning Location: South Todd Elementary Date of Return: 12/12/2023 Time of Return: 1:00 PM				
Chaperone/s: Erica Skipworth Chaperone's Phone #: 270.604.3011				
☐ Handicap Access		☐ Other: (Explain In Detail)		
ring been certified and approved to	drive? □Yes	□ No (Check One)		
Trip Requested By: E	rica Skipworth			
. 0	0	1 1 -		
ntative Auguster Cu	lin	Date: 10 31 25		
DISTRICT U	ISE ONLY			
******	• • • • • • • • •	Date:		
DRIVER – TURN THIS FORM IN WITH TIMESHEETS Section 3				
Odometer Start:				
	edge.			
		Date:		
r text.	-	7100 mm on proposition and an advantage of the control of the cont		
IL6		Date:		
	Organization: School: School: School: School: School: School: School: School: In-County Athletic   Out-of-County Athletic   Out-Of-State   On Baptist Building, Elkton, KY   y Central High School   Iny Date of Departure: 12/12/20   Iny Date of Return: 12/12/20   Iny Date of Return: 12/12/20   Iny Date of Return: 12/12/20   In Baptist Building, Elkton, KY   y Central High School   In Baptist Building, Elkton, KY   y Central High School   In Date of Departure: 12/12/20   In Date of Return: 12/12/20   In Date of Re	Organization: School: South Todd Elementary    Number of Passengers 39		