OLDHAM COUNTY BOARD OF EDUCATION ADMINISTRATIVE REGULATION

FIELD TRIP BUS REQUEST FORM Related to: Policy 8003, 4055, 8005AR; 8005.001F

OVERNIGHT V	EXTENDED DAY (Same day but extends beyond the school day)
School: Oldham County Middle School	(Same day our extends beyond the school day)
Employee(s) In Charge: Emma Harrison	Group: KMEA All-State Choir
Destination: Galt House Hotel	
Date(s) of Trip: 2/7/24 & 2/8/24	Time of Departure: 11am (2/7) Time of Return: 6pm (2/8)
Approximate Mileage (one way):	19 *
Approximate Number of Students:	9
Number of Chaperones/Adults:1	0
TOTAL TRANSPORTED: 0	*
Number of Buses: 0	
	dults (bus driver, teachers, coaches, chaperones, etc.)
Method of Transportation (if not by school	bus): Parent/chaperone take and stay with every student.
*Common Carriers must be Board approved an *All tolls are the responsibility of the school or	d should have the $8005.02F$ accompanying this form* group requesting the trip.
Trip Required or Optional: Optional	· · · · · · · · · · · · · · · · · · ·
If optional, indicate student charges:	driver) \$\frac{0}{\$250}\$\$ Charges \$\frac{250}{\$250}\$\$
Number of Instructional Days Lost: 2	
Justification: Why is the trip necessary? Wh	nat is to be learned? How will the experience be used and evaluated? o perform with the elite KMEA All-State Choir.
Requested by: Emma Harrison	Date: 12/06/2023
A A	PPROVAL/DISAPPROVAL
Approved/Disapproved: Approved/Disapproved: Approved/Disapproved:	, Principal Date: 17-7-23 , Level Director Date: 12-11-23 , Superintendent Date:
*Field trips in excess of a 60-mile radius of the Board *ALL Overnight Field Trips and trips using Common	office require the approval of the Superintendent. Carriers must be approved by the school board and Superintendent.
Upon approval, the school will receive an approved fo	

OLDHAM COUNTY BOARD OF EDUCATION ADMINISTRATIVE REGULATION FORM

FIELD TRIP PERMISSION FORM AND RELEASE

Relates to: Policy 4055

The undersigned parent/guardian of:	
Student's Name	
hereby grants permission for the above-named student to all organized activities and transportation: Date: Wed. + Thurs. 2/7 + 2/8/ Trip Description/Location: EMEA All-Star Supervising Staff Member: EMMO Har Approximate time of departure: Wed. drop off Purpose (state expected learning outcome or recreationa EMEA All-State Choir Transportation will be by: Commercial Bus or Common Carrier School But OCS School But	participate in the following field trip; including 24 Fee (if any): \$ 250.00 K / LOU. KY / Gouth house Li SON Approximate time of return: Th. piuk up (Tall): (a) 6 pm
Other: parent/guardiem ta Students must have proof of private insurance or student curriculars or extra-curricular activities or field trips awa Name of Insurance Carrier	accident insurance to participate in co-
In consideration of the advantages of participation in thi of Education of Oldham County, Kentucky, its agents ar vehicle used for the field trip shall be released and exeminjury or property damage that may occur during the trip	s field trip, the undersigned agrees that the Board and employees, and the driver and/or owner of the pt from any liability for damages for bodily
To Whom It May Concern:	
We (I), as Parent(s) of	alf and agree to "Hold Them Harmless" for any
Signature of Parent/Guardian	Date
Phone Number	Alternative Phone

OLDHAM COUN ADMINIST FIELD TRIP BUS REQUEST FORM Reford to: Policy 8005, 4055. 8005AR: 8005 001F **OLDHAM COUNTY BOARD OF EDUCATION** ADMINISTRATIVE REGULATION

Related to: Policy 8005, 4055, 8005AR; 8005.001F

OVERNIGHT	EXTENDED DAY	DAY TRIP ONLY
School: Kenwood Station Elementary	(Same day but extends beyond the school day	<i>y</i>
Employee(s) In Charge: Jessica Holmes	Group:	STLP
Destination: Rupp Arena, Lexington, KY	(STLP State Championship 2024)
	Time of Departure: 7:00 AM	Time of Return: 8:00 PM
	80 *	
	100	
	2	Needs Board Approva - Common Carrier
TOTAL TRANSPORTED: 112	*	1
Number of Buses: 2		-Common Carrier
*{44 Person Maximum for MS/HS} {60 Person *These numbers include both students and all ac	dults (bus driver, teachers, coaches, chaper	rones, etc.)
Method of Transportation (if not by school	bus): MA Jefferson lours	
*Common Carriers must be Board approved an *All tolls are the responsibility of the school or		g this form*
Trip Required or Optional: Optional		
If optional, indicate student charges:	driver) \$\frac{0}{50}\$ \$\frac{0}{50}\$ Charges \$\frac{0}{50}\$	
Number of Instructional Days Lost: 1	_	
Justification: Why is the trip necessary? W	hat is to be learned? How will the exp	erience be used and evaluated?
Finalists will be competing for State avawards.	vards and other students will be co	mpeting in Challenges for State
Requested by: Dylan Smith/Ashley Engli	sh Oldhur Grain	Date: 12/14/2023
	APPROVAL/DISAPPROVAL	1 / 12
Approved/Disapproved:	M., Principa	al Date: 17/14/13
Approved/Disapproved:	Level D	virector Date:
Approved/Disapproved:	, Superin	tendent Date:
*Field trips in excess of a 60-mile radius of the Board *ALL Overnight Field Trips and trips using Common		
Upon approval, the school will receive an approved for	orm from the Superintendent. *	

DEC 1 4 2023 DEC 1 4 2023 DEC 1 TEACHING & LEARNING

OLDHAM COUNTY BOARD OF EDUCATION ADMINISTRATIVE REGULATION

OCHE FIELD TRIP BUS REQUEST FORM

Related to: Policy 8005, 4055, 8005AR; 8005.001F

8005.01F

OVERNIGHT	EXTENDED DAY (Same day but extends beyond the school	DAY TRIP ONLY
School: 14 schools (BES, CA, CE, CR		
Employee(s) In Charge: Jennifer Dolan,	Leslie Wolf, Brandon Clark Gro	up: STLP
Destination: Rupp Arena, Lexington, K	Y (STLP State Championship 2	024)
Date(s) of Trip: March 27, 2023	Time of Departure: 7:00 AM	Time of Return: 6:00 PM
Approximate Mileage (one way):	*	
Approximate Number of Students:	200	
Number of Chaperones/Adults:	24	
TOTAL TRANSPORTED: 22	*	
Number of Buses:4		
*{44 Person Maximum for MS/HS} {60 Person *These numbers include both students and all a		naperones, etc.)
Method of Transportation (if not by school	ol bus): MA Jefferson Tou	rs
*Common Carriers must be Board approved a *All tolls are the responsibility of the school or		nying this form*
Trip Required or Optional: Optional		
If optional, indicate student charges: Transportation (mileage Admissions Other	\$ <u>0</u> \$ <u>0</u>	
Total	Charges \$\frac{0}{}	
Number of Instructional Days Lost: 1		
Justification: Why is the trip necessary? W	What is to be learned? How will the	experience be used and evaluated?
Finalists will be competing for State a awards.	wards and other students will be	e competing in Challenges for State
Requested by: Dylan Smith/Ashley Eng	lish Ally Englis	Date: 12/14/2023
	APPROVAL/DISAPPROVAL	/
Approved/Disapproved:	Al , Prir	ncipal Date: 12/19/23
Approved/Disapproved:	, Lev	el Director Date:
Approved/Disapproved:	, Sup	erintendent Date:
*Field trips in excess of a 60-mile radius of the Boar *ALL Overnight Field Trips and trips using Commo	rd office require the approval of the Superio	ntendent.
Upon approval the school will receive an approved	form from the Superintendent *	

Adopted Oldham County Board of Education September 2, 1980 Revised: February 1, 1985, September 1991, April 29, 1996, June 19, 1998, June 9, 1999, November 23, 1999, April 2, 2001, March 25, 2004, March 22, 2005, July 27, 2005, August 10, 2006, June 28, 2007, March 11, 2008, July 16, 2008, February 4, 2014, July 17, 2015, January 6, 2017, January 18, 2019

Acceptance

Route

Jefferson Tours and Charters

	Client ID	OldhCounSc		Charter ID	2661		
	Client	Ashley English		Movement ID	4279		
	Company	Oldham County Schools		Status	Firm		
C	lient Ref 1			Passengers	230		
С	lient Ref 2			Distance	165.4		
Fir	st Pick-up	7105 Floydsburg Rd, Crestwood,	KY	Destination	430 W Vine St,	Lexington,	KY
Pic	k-up Date	Wed 3/27/2024 Time 07:0	0	Arrival Date	Wed 3/27/2024	Time 0	8:35
Singl	e Journey	No		Leave Date	Wed 3/27/2024	Time 1	5:00
Vehic	le To Stay	Yes		Back Date	Wed 3/27/2024	Time 1	6:30
Seats	Vehicle D	escription	Vel	nicle No	Price Tax %	Tax	Total
56	Luxury Mo	otorcoach	1	\$1,9	66.65 0	\$0.00	\$1,966.65
56	Luxury Mo	otorcoach	2	\$1,9	66.65 0	\$0.00	\$1,966.65
56	Luxury Mo	otorcoach	3	\$1,9	66.65 0	\$0.00	\$1,966.65
56	Luxury Mo	otorcoach	4	\$1,9	66.65 0	\$0.00	\$1,966.65
56	Luxury Mo	otorcoach	5	\$1,9	66.65 0	\$0.00	\$1,966.65
56	Luxury Mo	otorcoach	6	\$1,9	66.65 0	\$0.00	\$1,966.65
	Fuel Surc	harge		\$7	07.99 0	\$0.00	\$707.99
Moven	nent Totals			\$12,50	07.89	\$0.00	\$12,507.89
Driver	Description	,	/ehicle No	Driver Description	n		Vehicle No
Driver		•		Driver			2
Driver		3	3	Driver			4
Driver			5	Driver			6

Further Requirements

School bus or motorcoach will be fine - whichever you have. We will likely need about 4 busses, if available! This will be to transport students for a competition - we will actually have our total number of student split between have two pick-up and drop-off sites. I can provide additional details as needed.

I have checked all the details above and agree that they are correct. I confirm that I would like to make a firm booking and I accept the above price and the payment terms detailed in the attached letter.

Signature

Coach Manager Printed: 12/13/2023 12:48:56 PM

Print Name

Date Mult

TAYLMO-C01

DSPEARS



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/25/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not conformable to the certificate holder in liquid found and recognition.

	f SUBROGATION IS WAIVED, subject his certificate does not confer rights to							require an endorsemen	t. A st	atement on
PRO	DDUCER				CONTA	CT Destiny	Spears			
Houchens Insurance Group			PHONE (A/C, No, Ext): (270) 563-7119 4290 FAX (A/C, No): (270) 843-8808							
	l0 Fairway Street wling Green, KY 42103					ss: dspears		om	. ,	
	×							RDING COVERAGE		NAIC#
					INSURE	THE STATE OF THE S		Insurance Company		32620
INS	URED				INSURE	Rв: Great A	merican In	surance Company		16691
	Taylor Motors, Inc.				INSURE	RC:				
	3820 U.S. 641 South				INSURE	RD:				
	Murray, KY 42071				INSURE	RE:				
					INSURE	RF:				
CC	OVERAGES CER	TIFI	CATE	NUMBER:				REVISION NUMBER:		
11	HIS IS TO CERTIFY THAT THE POLICIE NDICATED. NOTWITHSTANDING ANY R CERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	EQU PER	IREMI TAIN,	ENT, TERM OR CONDITION THE INSURANCE AFFORM	N OF A	NY CONTRAC	CT OR OTHER	R DOCUMENT WITH RESPE	ECT TO	WHICH THIS
INSF			SUBR WVD		DEEN	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT		
A		INSD	WVD	FOLICT NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)		s	5,000,000
``	CLAIMS-MADE X OCCUR			YPP3510060 20		5/1/2023	5/1/2024	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	_	100,000
	SE IIII E III E X			1111 3310000 20		3/1/2023	3/1/2024		\$	5,000
								MED EXP (Any one person) PERSONAL & ADV INJURY	\$	5,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	5,000,000
	POLICY PRO- LOC							PRODUCTS - COMP/OP AGG	\$	5,000,000
	OTHER:							PRODUCTS - COMPTOP AGG	\$	
Α	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$	5,000,000
	X ANY AUTO			YPP3510060 20		5/1/2023	5/1/2024	BODILY INJURY (Per person)	\$	
	OWNED SCHEDULED AUTOS							BODILY INJURY (Per accident)	\$	
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$	
	ACTOS SINE!								\$	
Α	UMBRELLA LIAB X OCCUR							EACH OCCURRENCE	\$	5,000,000
	X EXCESS LIAB CLAIMS-MADE			YEX3510060 19		5/1/2023	5/1/2024	AGGREGATE	\$	5,000,000
	DED X RETENTION\$ 0								\$	
Α	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			100 - 100 -				PER OTH- STATUTE ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A		YWC3510060 20	_	5/1/2023	5/1/2024	E.L. EACH ACCIDENT	\$	1,000,000
	(Mandatory in NH) If yes, describe under							E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
_	DESCRIPTION OF OPERATIONS below					E1410000	E1410004	E.L. DISEASE - POLICY LIMIT	\$	1,000,000
В	Property Coverage			MAC 8363672-13		5/1/2023	5/1/2024			
DES	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)									
CE	RTIFICATE HOLDER				CANO	ELLATION				
OLIVII IOATE HOLDER				SHO	ULD ANY OF T		ESCRIBED POLICIES BE CA EREOF, NOTICE WILL I Y PROVISIONS.			
	Oldham County Board of Edu 6165 W, KY-146 Crestwood, KY 40014	ıcati	on	s*		RIZED REPRESER		line		1

Crestwood, KY 40014 ACORD 25 (2016/03)

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Jefferson Tours and Charters 11117 Decimal Drive Louisville, KY 40299

Tel: 502-267-4007

Fax:Mrs AE English Oldham County Schools 6165 W Hwy 146 . KY 40014

Date: 12/13/2023

Dear Ashley:

2661 \$12,507.89

Jefferson Tours and Charters Confirmations.

Please see below our Terms and Conditions and kindly sign and return.

TERMS AND CONDITIONS

1. TO CONFIRM YOUR CHARTER:

The following items are required to book and confirm the date of your charter with Jefferson Tours and Charters (JTC). To reserve your charter:

(1) A deposit in the amount of 10% of the charter's total cost or \$350 (whichever is greater) is due upon booking. (2) A final (full) payment for charter service is due and must be received 30 days in advance of the charter date. (3) If it is less than 30 days prior to departure, a booking must be paid in full. All deposits and full payments may be paid by ACH, wire transfer, or credit card upon booking. If JTC is notified that a check payment has nonsufficient funds (NSF), an automatic fee of \$75.00 will be assessed to your charter. (4) Please reference the date of your trip and your trip Confirmation Order Number on check or forms.

2. CHARTERING PARTY CHANGES AND ITINERARY:

If a change is made by a Chartering Party that increases the number of miles or hours to a specific charter, additional charges may occur. A detailed written itinerary is required for all trips at least two weeks prior to departure to include dates, times, addresses, contact information, and any other pertinent information about the trip. Restrictions at pick up or delivery locations are subject to vehicle size and or the driver's professional judgement and may alter pickup locations.

Any change must be received no later than 72 hours (about 3 days) prior to departure. Any changes within 72 hours may be subject to additional charges. Prices are subject to change based upon the final itinerary. The Chartering Party is responsible for reserving (a) hotel room(s) for the driver(s) for out of town events. The group is responsible for all tolls, parking, ferry, and entrance fees incurred on the trip. The group is responsible for providing our driver with a single, non-smoking hotel room. If this trip involves 2 or more drivers per bus, then each driver must be provided with a single room. Taylor Motors is not responsible for any luggage or personal items

left either inside the motorcoach or underneath in the luggage compartments. Driver's gratuity is not included in this price unless it is itemized on the acceptance page.

3. DRIVER HOURS AND SAFETY REVIEW:

Because a driver is limited in hours of daily service, Itineraries are subject to review by a company official. Federal Department of Transportation safety regulations prohibit drivers to be on duty more than fifteen (15) hours per day, ten (10) of which are for driving (including a 30-minute pre- and post-trip vehicle inspection). The driver must be given eight (8) consecutive hours off before he/she may resume his/her duties.

4. DAMAGES TO BUSES:

The cost of repairing damage to buses resulting from the conduct or actions of passengers on that specific charter shall be charged to the Chartering Party and is payable as soon as such cost is determined.

5. ARRIVAL TIME IS CONDITIONAL:

Operators are instructed to drive at a speed within the limits prescribed by law and compatible with safe operation. Unusual road, traffic and weather conditions are beyond Company control.

6. FLEET VEHICLE TYPE

Before being assigned to the charter service, JTC's Fleet is thoroughly inspected to ensure uninterrupted service. If a mechanical failure occurs before or during a charter trip a replacement bus may be different than originally understood.

7. CONDUCT OF PASSENGERS:

JTC reserves the right to eject or refuse passenger status to anyone under the influence of intoxicating liquor or drugs, or who are, or are likely to become objectionable to other persons. Passengers shall not interfere with the operator in the discharge of his or her duty or tamper with any apparatus or appliance on the bus.

8. SURCHARGES MAY BE ADDED:

Jefferson Tours and Charters reserves the right to charge a surcharge upon booking your transportation based on fuel prices and other required commodities for contracted charter.

9. PANDEMIC GUIDELINES:

JTC will provide customers with Federal CDC (Centers for Disease Control) guidelines regarding travel during a pandemic. However, it is at the discretion of the booking party to decide whether they will follow recommended social distancing guidelines. JTC is not responsible for enforcing CDC social distancing measures or the social distancing guidelines of other jurisdictions that the booking party may travel through or disembark from while traveling on a JTC charted motorcoach, or any other JTC chartered vehicle. Customers acknowledge and agree that JTC is not responsible for any loss or damage resulting from customer or others contracting Covid-19 or any other illness while utilizing the services of JTC. By signing our contract, you are releasing JTC of any liability and accepting all liability for any pandemic related illness on the vehicle.

10. DAMAGE DEPOSIT:

A \$350.00 deposit (per bus) will be required if JTC feels it is necessary for the trip you are taking (especially if alcohol is involved before or during your trip). The deposit will be refunded if the bus is returned undamaged and with no excessive cleaning.

11. PRICES SUBJECT TO CHANGE:

All charter prices quoted in the confirmation are subject to change under the terms herein, up until the day of departure. but shall not be increased, in the aggregate, by more than twenty percent (20%).

12. PROHIBITED ITEMS WITHOUT CONSENT:

JTC prohibits the following items: (a) Decorations (b) Smoking (c) Glass containers or Kegs (d) Golf shoes, ski boots, or other shoes with spikes (unless stored & not worn) (e) Fuel containers (f) Firearms, explosives, and fireworks (federal law). However, a written request for some items may be considered for consent by JTC.

13. CANCELLATION POLICY:

Cancellations made 30 days or more in advance of the charter departure date will receive a 100% refund. Cancellations made within 7-30 days of the charter departure date will incur a 10% of charter cost fee or \$300.00 (whatever is greater). When hotel rooms or special accommodations are booked by the company and become non-cancellable, the chartering party will be required to pay the full price for the rooms. Cancellations made within 6 days of the charter departure date will incur a 50% of charter cost fee. Cancellations made on the departure date will incur a 100% charter cost fee.

14. PAYMENT TERMS:

The price of your charter is quoted as a cash price. Our preferred method of payment is company check, cash, electronic or wire transfer. Credit card payments are subject to a 3% extra charge. Full payment is due 30 days before departure. Driver gratuity is not included in the final price, \$2.00 per day, per passenger, is an example of driver gratuity.

15. ENTIRE AGREEMENT:

This Agreement constitutes the entire agreement between the parties for transportation as listed in the acceptance and supersedes all other agreements, either oral or written with respect to the subject matter hereof.

Mutual Indemnification Clause

Each of the parties covenants and agrees to indemnify and hold the other and its respective subsidiaries, affiliates, officers, directors, shareholders and employees free, clear and harmless from any and all liability, judgment, claims costs, expenses (including attorney's fees), and demands of any kind, including damages for personal and or property damage or both, arising out of, or by reason of any act, of willfful miscounduct, or gross negligence of the indemnifying party or its respective agents, employees, servants, or contractors.

Force Majeure

Neither party shall be liable for any failure or delay in performance under this Agreement to the extent said failure or delay is caused by conditions beyond its control, including but not limited to: Acts of God; governmental restrictions and/or regulations; war or apparent act of war; terrorism or apparent act of terrorism; disaster; civil disorder, disturbance, and/or riots; curtailment, suspension, and/or restriction on transportation facilities/means of transportation; performance failures of parties outside the control of the contracting parties; pandemics; strikes; or any other emergency making it inadvisable, illegal, impracticable or impossible for either party to perform under this Agreement. Either party may cancel this Agreement for any one or more of such reasons upon written notice to the other without penalty.

16. DRIVERS HOURS OF SERVICE

Itineraries are subject to review by a safety officer of the Company. Federal Department of Transportation safety regulations prohibit drivers to be on duty more than fifteen (15) hours per day, ten (10) of which are for driving (including a 30-minute pre- and post-trip vehicle inspection). The driver must be given eight (8) consecutive hours off before he/she may resume his/her duties. Below you will find examples that may be used as a guide to assist you in planning your trip: Example: You arrive at your hotel at 10:00pm and your driver unloads your luggage, parks the coach, does their post trip inspection, and then cleans the coach finishing at 11:00pm. The next morning the earliest that the driver can start their pre-trip is 7:00am: the

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Force Majeure

Neither party shall be liable for any failure or delay in performance under this Agreement to the extent said failure or delay is caused by conditions beyond its control, including but not limited to: Acts of God; governmental restrictions and/or regulations; war or apparent act of war; terrorism or apparent act of terrorism; disaster; civil disorder, disturbance, and/or riots; curtailment, suspension, and/or restriction on transportation facilities/means of transportation; performance failures of parties outside the control of the contracting parties; pandemics; strikes; or any other emergency making it inadvisable, illegal, impracticable or impossible for either party to perform under this Agreement. Either party may cancel this Agreement for any one or more of such reasons upon written notice to the other without penalty.

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driver is then required to do a pre-trip and begin their paperwork could begin with your group would be/7:30am.	for that day. The earliest they
Signed & Agreed by:	
The Chartering Party	Date:[<u>\begin{align*}{ c c c c c c c c c c c c c c c c c c c</u>
Jefferson Tours & Charters	Date://

► OCBE MTG 4 JAN 2 2 2023

OLDHAM COUNTY BOARD OF EDUCATION ADMINISTRATIVE REGULATION

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riel	ע	IKIP	DUS	KE	JUESI	FORM

Related to: Policy 8005, 4055, 8005AR; 8005.001F

DEC 1 4 2023

OCBE - TEACHING & LEARNING

OVERNIGHT 2	EXTENDED DAY
School: South Oldham High School	(Same day out extends beyond the school day)
Employee(s) In Charge: Ryan McAllister	Group: Band
Galt House (Louisville)	Gloup.
Date(s) of Trip: 2/7/28 - 2/10/28	Time of Departure: 4:00 pm Time of Return: 2:00 pm
Approximate Mileage (one way):	*
Approximate Number of Students:	2
Number of Chaperones/Adults:1	
TOTAL TRANSPORTED:3	*
Number of Buses:0	
*{44 Person Maximum for MS/HS} {60 Person in the students and all additional method of Transportation (if not by school)	dults (bus driver, teachers, coaches, chaperones, etc.)
	d should have the 8005.02F accompanying this form*
*All tolls are the responsibility of the school or s	
Trip Required or Optional: Optional	
If optional, indicate student charges: Transportation (mileage, Admissions Other Total C	driver) \$
Number of Instructional Days Lost: 2	_
Justification: Why is the trip necessary? Wh	nat is to be learned? How will the experience be used and evaluated? s will perform with other top students from across the state,
work with a top clinician, and perform a	concluding concert.
Requested by: Ryan McAllister	Date: 12/11/23
A	PPROVAL/DISAPPROVAL
Approved Disapproved:	Woods, Principal Date: 12-11-73
Approved/Disapproved:	Level Director Date: 12/15/23
Approved/Disapproved:	, Superintendent Date:
*Field trips in excess of a 60-mile radius of the Board *ALL Overnight Field Trips and trips using Common	office require the approval of the Superintendent. Carriers must be approved by the school board and Superintendent.
Upon approval, the school will receive an approved fo	rm from the Superintendent. *

OLDHAM COUNTY BOARD OF EDUCATION ADMINISTRATIVE REGULATION

FIELD TRIP BUS REQUEST FORM

Related to: Policy 8005, 4055, 8005AR; 8005.001F

JAN 03 2024	
OCBE - TEACHING & LEARNING	

OVERNIGHT V	EXTENDED DAY DAY TRIP ONLY
School: North Oldham Middle School	(Same day but extends beyond the school day)
Employee(s) In Charge: Jonathan Perri	Group: KYA
Destination: 280 W Jefferson St, Louisvi	lle, KY 40202
Date(s) of Trip: 03/10/2024 - 3 12 24	
	*
Approximate Number of Students:	75
Number of Chaperones/Adults:5	<u> </u>
TOTAL TRANSPORTED: 80	*
Number of Buses:0	
	ults (bus driver, teachers, coaches, chaperones, etc.)
Method of Transportation (if not by school	bus): Parent Drop-off / Pick-up
*Common Carriers must be Board approved and *All tolls are the responsibility of the school or g	I should have the 8005.02F accompanying this form* group requesting the trip.
Trip Required or Optional: Optional	
If optional, indicate student charges: Transportation (mileage, of Admissions Other Total C	\$TBD \$TBD
× .	<u></u>
Number of Instructional Days Lost: 2	
The Kentucky United Nations Assembly students participate directly in simulate to experience the richness of cultures for the state of	at is to be learned? How will the experience be used and evaluated? (KUNA) is a 3-day, experiential-learning conference in which d international diplomacy. KUNA offers students the opportunity rom around the world, develop empathy, and hone their critical de variety of perspectives and global issues.
Requested by: Jonathan Perri	Date: 12/18/2023
A	PPROVAL/DISAPPROVAL
Approved/Disapproved:	Attentiv , Principal Date: 12/26/23
Approved/Disapproved:	, Level Director Date: 1/3/24
Approved/Disapproved:	, Superintendent Date:
*Field trips in excess of a 60-mile radius of the Board *ALL Overnight Field Trips and trips using Common	office require the approval of the Superintendent. Carriers must be approved by the school board and Superintendent.
Upon approval, the school will receive an approved for	rm from the Superintendent. *

OLDHAM COUNTY BOARD OF EDUCATION ADMINISTRATIVE REGIILATION RECEIPT

ADIVIII	IDIII.	III I E I I E GOLIA			
FIELD TRIP BUS REQUEST FOR Related to: Policy 8005, 4055, 8005AR; 8005.001F	RM		J	AMAR	8005.01F
OVERNIGHT	~~~~	NDED DAY V o but extends beyond the sch	OCBE . 7	EACHING & TEAT	ONLY
School: North Oldham Middle School					8
Employee(s) In Charge: Tyler Smith	100.0	Gr	oup: Chorus	}	
Destination: Cathedral of the Assumption					
Date(s) of Trip: 02/09/2024		f Departure: 8:30 AM	Time o	of Return: 4:30	PM
Approximate Mileage (one way): 20 m		_*			
Approximate Number of Students.	70	_			
Number of Chaperones/Adults: 5		_			
TOTAL TRANSPORTED: 75		*			
Number of Buses: 2	_				
*{44 Person Maximum for MS/HS} {60 Person M *These numbers include both students and all add	ults (bus d	lriver, teachers, coaches,		c.)	
Method of Transportation (if not by school b	bus): <u>Jef</u>	ferson Tours & Char	ters		
Common Carriers must be Board approved and	d should he	ave the 8005.02F accomp		ım	
*All tolls are the responsibility of the school or g Trip Required or Optional: Required	roup requ	esting the trip.			
If optional, indicate student charges: Transportation (mileage, d Admissions Other	lriver)	\$1,100 \$0 \$125	8		
Total C	harges	_{\$} 1,225			
Number of Instructional Days Lost: 1	- E				
Justification: Why is the trip necessary? When These students have been selected to present and highly selective. They will gain the from across the state and will serve as 17th grade should sound like. This is an experience of the state and will serve as 18th grade should sound like.	perform valuable role mod	for KMEA State Con experience of singir dels for their age gro	ference, wh ng in front of up in terms	nich is an increo f teachers and of what a good	dible honor students d choir in
Requested by: Tyler Smith		8	Date:	01/02/2024	
Mn A	PPROV	AL/DISAPPROVAL		. 2:	
Approved/Disapproved:	The	enefre, Pr	incipal	Date:	124
Approved/Disapproved:	rulfo	, Le	vel Director	Date:	129

Upon approval, the school will receive an approved form from the Superintendent. *

Approved/Disapproved:

, Superintendent Date: ______

^{*}Field trips in excess of a 60-mile vadius of the Board office require the approval of the Superintendent.
*ALL Overnight Field Trips and trips using Common Carriers must be approved by the school board and Superintendent.

OLDHAM COUNTY BOARD OF EDUCATION ADMINISTRATIVE REGULATION

APPLICATION FOR USE OF COMMON CARRIER

8005.02F

References: 702 KAR 5:060

Related to: Policy 8005, 4055, 8005AR-8005.04AR; 8005.01F, 8005.06F

This application is to be completed only when transportation of students will be other than by school bus. 702 KAR 5:060 - Section 6: Item (2)

School districts may, in their reasonable discretion and with due regard to the safety and required supervision of the school children to be transported, utilize appropriately certificated common carriers, in regular or charter service, to transport school children to or from school-related events, as long as the vehicles so utilized are not significantly used as school buses. Such use of common carrier service, in lieu of qualifying school buses, shall be on a case-by-case basis, and the reasons believed by the board to justify such shall be cited in the board minutes. (SBE 24.225: 1 KY.R 1052: eff. 6-11-75: Am. 9 KY.R 1309: eff. 7-6-83: 12 KY.R 1634: eff. 5-6-86)

School: Date: 24
Employee(s) In Charge: Tyler Smith Group: Chorus
Date of Trip: 29 24 Destination: Cathedral of the Assumption
Main Mode of Travel: Bus
Name of Major Carrier: 18 Flerson Tows + Charles Phone: (502) 267-4067
Address: 1117 Decimal Dr. Louisville, KY 40299
Method of transportation to the departure point: <u>Parents</u>
Type of transportation upon destination arrival:
Company name:Phone:
Contact person if available:
Why have you selected these transportation methods? This trip is elfended day and outside of school hours.
· · · · · · · · · · · · · · · · · · ·
Misa Staneha Teacher or Sponsor

(Attach a regular Field Trip Request Form (8005.01F) and the Common Carrier Insurance Certificate for Board approval.)

DSPEARS

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/25/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed.

th	nis certifi	GATION IS WAIVED, subje- cate does not confer rights t	o the	certi	ficate holder in lieu of su	ch end	lorsement(s).			, , ,	
	DUCER						CT Destiny S		FAV		
Hou	ichens In 0 Fairway	surance Group				PHONE (A/C, No	o, Ext): (2/U) 5	63-7119 42		(270)	843-8808
Boy	vling Gre	en, KY 42103				E-MAIL ADDRE	_{ss:} dspears@	@higusa.co	om		
							562595150 000000		RDING COVERAGE		NAIC#
									Insurance Company		32620
INSU	JRED					INSURE	Rв: Great A	merican In	surance Company		16691
		Taylor Motors, Inc.				INSURE	RC:				
		3820 U.S. 641 South Murray, KY 42071				INSURE	RD:				
		Wullay, KT 42071				INSURE					
						INSURE	RF:		DEL MOION NUMBER		
	VERAGE				NUMBER:	LIANE D	EEN IOOUED T		REVISION NUMBER:	TUE DO	OLICY DEDICE
11	NDICATED	O CERTIFY THAT THE POLICI O. NOTWITHSTANDING ANY F TE MAY BE ISSUED OR MAY	EQUI PFR	REMI TAIN	ENT, TERM OR CONDITIO THE INSURANCE AFFOR	N OF A	NY CONTRAC 7 THE POLICI	CT OR OTHER ES DESCRIB	R DOCUMENT WITH RESP ED HEREIN IS SUBJECT	ECT TO	O WHICH THIS
		NS AND CONDITIONS OF SUCH	POLI	CIES.	LIMITS SHOWN MAY HAVE	BEEN	POLICY EFF	PAID CLAIMS,			
INSR		TYPE OF INSURANCE	INSD	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	(MM/DD/YYYY)	LIMI	T	5,000,000
Α	X COM	IMERCIAL GENERAL LIABILITY			VDD2540060 20		5/1/2023	5/1/2024	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000
	$\vdash\vdash\vdash$	CLAIMS-MADE X OCCUR			YPP3510060 20		5/1/2023	3/1/2024		\$	5,000
	H-								MED EXP (Any one person) PERSONAL & ADV INJURY	\$	5,000,000
		ACDEC LIE I I WIT ADDI IEO DED.							GENERAL AGGREGATE	\$	5,000,000
	GEN'L AG	GREGATE LIMIT APPLIES PER: ICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG		5,000,000
				1.	F .				TRODUCTS - GOINI FOT AGG	\$	
Α	OTH	BILE LIABILITY	<u> </u>						COMBINED SINGLE LIMIT (Ea accident)	\$	5,000,000
		AUTO			YPP3510060 20		5/1/2023	5/1/2024	BODILY INJURY (Per person)	\$	
		NED SCHEDULED AUTOS			/		2		BODILY INJURY (Per accident	\$	
		OS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$	
	701	AUTOS GIVET								\$	
Α	UME	BRELLA LIAB X OCCUR							EACH OCCURRENCE	\$	5,000,000
	X EXC	ESS LIAB CLAIMS-MADE			YEX3510060 19		5/1/2023	5/1/2024	AGGREGATE	\$	5,000,000
	DED	X RETENTION\$							DED OTH	\$	
Α	WORKERS AND EMP	S COMPENSATION LOYERS' LIABILITY Y/N			NAMO 2540000 00		E1410000	E1412024	PER OTH- STATUTE ER	+	1,000,000
	ANY PROF	PRIETOR/PARTNER/EXECUTIVE MEMBER EXCLUDED? by in NH)	N/A		YWC3510060 20		5/1/2023	5/1/2024	E.L. EACH ACCIDENT	\$	1,000,000
					_				E.L. DISEASE - EA EMPLOYE		1,000,000
_		cribe under FION OF OPERATIONS below			MAC 8363672-13		5/1/2023	5/1/2024	E.L. DISEASE - POLICY LIMIT	\$	1,000,000
В	Propert	y Coverage			WIAC 0303072-13		3/1/2023	0/1/2024			
					*				77		
_											
DES	CRIPTION (OF OPERATIONS / LOCATIONS / VEHIC	LES (ACORI	D 101, Additional Remarks Sched	ule, may	be attached if mor	e space is requi	rea)		
1											
CF	RTIFICA	TE HOLDER				CAN	CELLATION				
	IIIIOA	I E II CEPEIL			-	1			35		10
						THE	EXPIRATION	N DATE TH	DESCRIBED POLICIES BE OF THE PROVISIONS.		
						ALITUR	RIZED REPRESE	NTATIVE			
		Oldham County Board of Ed	ducat	ion					lan		

Crestwood, KY 40014

ACORD

OLDHAM COUNTY BOARD OF EDUCATION ADMINISTRATIVE REGULATION ROUSE FORM

FIELD TRIP BUS REQUEST FORM

Related to: Policy 8005, 4055, 8005AR; 8005.001F

JAN 1 1 2024

OVERNIGHT ✓	(Same day but extends beyond the school day)
School: NOHS, OCHS, SOHS	(same any our circums objoins inc source any)
Employee(s) In Charge: Jaclyn Green, P.	ati Wollert, Tara Steedly Group: GATES College Blitz
Destination: Northern Ohio colleges (Xa	vier Univ., Univ of Cincinnati, Miami Univ., Univ of Dayton)
Date(s) of Trip: Feb 27-28, 2024	Time of Departure: 7:30 AM Time of Return: 5:30 PM
Approximate Mileage (one way):~25	<mark>50 mi </mark> *
Approximate Number of Students:	50
Number of Chaperones/Adults:	
TOTAL TRANSPORTED: 55	*
Number of Buses:1	_
	dults (bus driver, teachers, coaches, chaperones, etc.)
Method of Transportation (if not by school	bus): Motorcoach (Miller Transportation
*Common Carriers must be Board approved an *All tolls are the responsibility of the school or	d should have the 8005.02F accompanying this form* group requesting the trip.
Trip Required or Optional: Optional	
If optional, indicate student charges: Transportation (mileage, Admissions Other Total C	driver) \$\frac{52.00}{\\$0.00} \\ \\$\frac{123.00}{\} \text{Charges} \\$\frac{175}{\}
Number of Instructional Days Lost: 2	
Justification: Why is the trip necessary? Wh	nat is to be learned? How will the experience be used and evaluated?
Opportunity for students to visit four caretc. It's important for students to see a out what they prefer, and explore beyon	mpuses that are diverse in size, rural vs urban, public vs. private, variety of characteristics as they "shop" to help them rule in and nd tmore familiar KY colleges.
Requested by: Jaclyn Green Jaclyn Green	Un Juer Date: 01/05/2024
A	PPROVAL/DISAPPROVAL
Approved/Disapproved: Approved/Disapproved:	, Principal Date:, Principal Date:
Approved Disapproved	, Superintendent Date
Field trips in excess of a 60-mire radius of the Board *ALL Overnight Field Trips and trips using Common	office require the approval of the Superintendent. Carriers must be approved by the school board and Superintendent.
Upon approval, the school will receive an approved fo	rm from the Superintendent. *

OLDHAM COUNTY BOARD OF EDUCATION ADMINISTRATIVE REGULATION

APPLICATION FOR USE OF COMMON CARRIER

8005.02F

References: 702 KAR 5:060

Related to: Policy 8005, 4055, 8005AR-8005.04AR; 8005.01F, 8005.06F

This application is to be completed only when transportation of students will be other than by school bus. 702 KAR 5:060 - Section 6: Item (2)

School districts may, in their reasonable discretion and with due regard to the safety and required supervision of the school children to be transported, utilize appropriately certificated common carriers, in regular or charter service, to transport school children to or from school-related events, as long as the vehicles so utilized are not significantly used as school buses. Such use of common carrier service, in lieu of qualifying school buses, shall be on a case-by-case basis, and the reasons believed by the board to justify such shall be cited in the board minutes. (SBE 24.225: 1 KY.R 1052: eff. 6-11-75: Am. 9 KY.R 1309: eff. 7-6-83: 12 KY.R 1634: eff. 5-6-86)

School: District - NOHS, OCHS, SOHS	Date: 02/27/2024
Employee(s) In Charge: Jaclyn Green	Group: GATES College Blitz
Date of Trip: 02/27/2024 Destination:	Xavier, U Cincinnati, Miami U, U Dayton
Main Mode of Travel: motorcoach	
Name of Major Carrier: Miller Transportation	Phone: (800) 544-2383
Address: 111 Outer Loop, Louisville, KY 4021	4
Method of transportation to the departure point: provide	ed by parents/guardians
Type of transportation upon destination arrival:	
Company name: Miller Transportation	Phone: (800) 544-2383
Contact person if available: April Jewell	
Why have you selected these transportation methods? dis	tance and number of students traveling
T.	8
5	*
\sim 0	\bigcirc
Jodenstreen	Jackenbuer
Principal	Teacher or Sponsor

(Attach a regular Field Trip Request Form (8005.01F) and the Common Carrier Insurance Certificate for Board approval.)

Acceptance

Miller Transportation Inc.

Client ID	179585	Charter ID	191621		
Client	Ms AE English	Movement ID	10.10		
Company	OCBE-Central Office	Status	Firm		
Client Ref 1	5	Passengers	1		
Client Ref 2		Distance	×		
First Pick-up	LaGrange, KY	Destination	Cincinnati, OH and Dayton, OH		
Pick-up Date	Tue 2/27/2024 Time 07:30	Arrival Date	Tue 2/27/2024 Time		
	No	Leave Date	Wed 2/28/2024 Time		
Single Journey	110				

Oldham County Arts Center Parking Lot 7105 Floydsburg Road Crestwood, KY 40014

(4) colleges in northern Ohio (Xavier, UC, MU, and UDayton)

she will send an itinerary

Seats	Vehicle Description	Ve	hicle No	Price	Tax %	Tax	Total
56	Premium Motorcoach	1		\$2,600.00	0	\$0.00	\$2,600.00
Movem	nent Totals			\$2,600.00	, , , , , , , , , , , , , , , , , , ,	\$0.00	\$2,600.00
Driver I	Description	Vehicle No	Driver D	escription			Vehicle No
Motorc	oach Charter Driver	1					
Vehicle	e Facilities						

110 Outlets MC Only

WIFI MC Only

I have checked all the details above and agree that they are correct. I confirm that I would like to make a firm booking and I accept the above price and the payment terms detailed in the attached letter. Miller Transportation is not responsible for delays due to traffic, weather, or mechanical issues. Miller Transportation is not responsible for any parking fees.

Signature

Print Name

Date

Coach Manager Printed: 1/5/2024



COLUMBUS, OH

INDIANAPOLIS, IN

LOUISVILLE, KY

Ms English OCBE-Central Office 6165 W Hwy 146 Crestwood KY 40014

Date: 1/5/2024

Transportation Confirmation

Dear Ms English,

Thank you for choosing Miller Transportation for your travel needs. We are committed to providing you with the very best service possible. I am sure you will be pleased with the quality of our equipment and drivers. The documentation received with this letter serves as your contract for your transportation needs. Please review the contract carefully before signing. We must receive your **deposit of \$260.00** along with one signed and dated copy of the acceptance letter within 14 days following the date of this letter. **Final Balance due 30 days prior to departure date.** To make a payment visit https://distinctive.millertransportation.com/Login and log in using your email and password. If you need a password set up please contact your sales associate. Payments are refundable until 30 days prior to the charter. A 10% cancellation fee is charged for charters canceled less than 30 days prior. Trips canceled less than 24 hours before departure are subject to full charge.

Along with your final payment, please send a copy of your final itinerary complete with times, locations and addresses. Changes to your final itinerary may incur additional costs to your charter. Gratuity is not included. Please tip your driver for good service. When on an overnight charter, requiring the driver to stay with the group, the group is responsible for reserving and purchasing the driver's lodging. Hotel must have bus parking. Please book a separate room for each driver. Always ask your sales rep if you have any questions. Our offices are open Monday-Friday 8:00am-5:00pm. Your sales associate is always happy to speak with you during these hours. If you need emergency assistance or need to cancel a charter outside of our normal business hours, please call (502) 368-5644 or (800) 544-2383 and follow the emergency procedures. All cancelled trips are subject to a cancellation fee.

Food is allowed on the coaches, please put all trash in garbage bags and remove from coach. Red, orange and grape drinks are not allowed on the coach. Alcohol is permitted on the coach with approval from the Miller office. We charge a \$250.00 refundable damage and cleaning deposit for alcohol to be consumed on the coach. Smoking is prohibited on all coaches.

We currently have facilities in Louisville, Ky, Indianapolis, IN and Columbus, OH. We operate 115 motorcoaches and 180 school buses along with shuttle buses and trolleys. Buses may be tracked in real time during your charter. Our drivers are uniformed, receive monthly safety training and participate in a random drug program.

Miller Transportation is not responsible for any lost or stolen articles left on the bus. For those wishing to pay by VISA or Mastercard there is a 3% convenience fee. There is a 4% convenience fee for American Express. Again, thank you for choosing Miller Transportation. Enjoy your trip!!!

April Jewell - Motorcoach Sales Manager April@millertransportation.com

MEMO

Dear Customers.

Safety is Miller Transportations #1 concern for our employees and customers. Please keep these regulations in mind as you plan your itinerary. We are monitoring all itineraries to make sure they follow these guidelines. Please send itineraries to the sales department as soon as possible for each trip.

Effective December 18th 2017, all carriers were required to use an Electronic Logging Device (ELD) to keep records of duty status. This includes commercial buses as well as trucks. The hours of service limits have not changed. However, the purpose of the new ELD mandate is to ensure our drivers are not exceeding the 10,15, and 70 hours rules. An ELD is technology that automatically records a driver's time and other hours-of-service. This allows easier, more accurate HOS recordkeeping. An ELD monitors a vehicle's engine to capture data on where the engine is running, whether the vehicle is moving, miles driven, and duration of engine operation.

Keep in mind, should our drivers exceed the rules we could be fined or even worse, an officer could place our driver out of service until there is an 8 hour re-set for that driver. Make sure all itinerary changes are approved by the sales and dispatch office. If you have any questions or concerns about your itinerary fitting these guidelines please do not hesitate to ask the sales department.

The hours of service limits are:

1. 10-Hour Driving Limit.

Our driver is allowed 10 hours of driving time after 8 consecutive hours off duty. There is no limit on how many of those hours our driver is allowed to drive at one time- our driver may drive for as little as a few minutes or as much as 10 hours in a row. Once our driver has driven a total of 10 hours, the driver has reached the driving limit and must be off duty for another 8 consecutive hours before driving a commercial motor vehicle again. There must be no on-duty or driving time during those 8 hours.

2. 15 Hour On-Duty Limit.

Following 8 consecutive hours off duty, a driver must not drive a commercial motor vehicle after being on duty 15 hours. A driver may do other work after being on duty 15 hours, but a driver may not drive. Off duty time taken during the day, such as a lunch break or nap, does not count toward this 15-hour limit.

70-Hour Duty Limit

In addition to the limits explained above, there is a 70-Hour limit. This means our driver may not drive after being on duty 70 hours in any 8 consecutive days. Once a driver reaches the 70-hour limit, the driver may not drive again until he/she has dropped below 70 hours for an 8-consecutive-day period.

The hours of service regulations may be found in section 395.5

OCE TEVELD TRIP BU

OLDHAM COUNTY BOARD OF EDUCATION ADMINISTRATIVE REGULATION

FIELD TRIP BUS REQUEST FORM

Related to: Policy 8005, 4055, 8005AR; 8005.001F

JAN 1 2 2024

OVERNIGHT 🗵	EXTENDED DAY	TEACHING	& LEARNING DAY T	RIP ONLY	
School: North Oldham High School	(Same day but extends bey	ond the school day)			
Employee(s) In Charge: Brian Crumbo		Group. G	irls Track and F	ield	1877 - 1 4384
Destination: Mobile, AL		O.Oup.		9	- Control of the Cont
Date(s) of Trip: March 21-24, 2024	Time of Departure: _	12:23 am	Time of Return:	6:00pm	-
	40 *				1
Approximate Number of Students:	40				
Number of Chaperones/Adults:					
TOTAL TRANSPORTED: 43	*				
Number of Buses:	_				
*{44 Person Maximum for MS/HS} {60 Person I *These numbers include both students and all ad	Maximum for ELEM} lults (bus driver, teachers,	coaches, chapero	nes, etc.)	0	
Method of Transportation (if not by school	bus): Parent transpo	ortation	Sandol	lar	
*Common Carriers must be Board approved and *All tolls are the responsibility of the school or g	d should have the 8005.02 group requesting the trip.	F accompanying		,	
Trip Required or Optional: Optional			11/24 0	hange -	now
If optional, indicate student charges: Transportation (mileage, of Admissions Other	driver)	\$ 100.00 \$ 100.00	11/24 of taking so	andolla Walker.	V to/from
Total C	harges \$	\$ 200.00			
Number of Instructional Days Lost:					,
Justification: Why is the trip necessary? Wh	– at is to be learned? Ho	w will the exper	ience be used and	evaluated?	
Out of state competition and team					
Requested by: Brian Crumbo		r	Date: 10/12/2022	2	-
()A	PPROVAL/DISAPPR	ROVAL			
Approved/Disapproved:	101823	, Principal , Level Dir	Date:	19/23	
Approved/Disapproved:		, Superinte	ndent Date: <u>//</u>	21.23	
*Field trips in excess of a 60-mile radius of the Board *ALL Overnight Field Trips and trips using Common (office require the approval of Carriers must be approved by	of the Superintenden the school board a	t. ind Superintendent.		
Upon approval, the school will receive an approved for	m from the Superintendent.	#			

OLDHAM COUNTY BOARD OF EDUCATION ADMINISTRATIVE REGULATION - 8005.02-F



APPLICATION FOR USE OF COMMON CARRIER

Related to Board Policies 8005 and 4055 Related to 8005.01-F; 8005.06-F; 8005 – 8005.04-AR	
School: North Oldham High School Date: January 4,	2024
This application is to be completed only when transportation of students will be regular field trip Form for Board approval.) 702 KAR 5:060 - Section 6: Item (2) School districts may, in their reasonable discretion and with due regard supervision of the school children to be transported, utilize appropri carriers, in regular or charter service, to transport school children to or as long as the vehicles so utilized are not significantly used as school be carrier service, in lieu of qualifying school buses, shall be on a case-by-believed by the board to justify such shall be cited in the board minuted 1052; eff. 6-11-75; Am. 9 Ky.R 1309; eff. 7-6-83: 12 Ky.R 1634; eff.	to the safety and required ately certificated common from school-related events, uses. Such use of common case basis, and the reasons es. (SBE 24.225: 1 Ky.R 5-6-86)
Date of Trip March 21-24, 2024 Main Mode of Travel: Charter Bus	
Name of Major Carrier: Sandollar Limousine Phone:	502) 366-2628
Address: 321 Outer Loop Hwy, Louisville, KY 40214	
Method of transportation to the departure point: Will pick up at NOHS	
Type of transportation upon destination arrival:	
Company name: Sandollar Limousine (same) Phone:	6
Contact person if available:	
Why have you selected these transportation methods: Flexibility and cost effecti	veness.
Spin C	Nu umb a
Principal Brian C	or Sponsor
Adopted: Revised: August 5, 1998 Revised: June 9, 1999 Revised: August 10, 2006	

Revised: March 11, 2008 Revised: July 17, 2015



Driver Gratuity (Clients' Discretion)

PAYMENT RECEIVED

Sandollar Limousine

Office: 321 Outer Loop Hwy Louisville , KY 40214 Phone: 502.366-2628

Email: Evan@sandollarlimo.com

Contract:	5
Driver:	
Sales Associate:	Evan
Prepared by:	Tyler

Client	Notur Oldriam no	Date of Service	3/21/24-3/24/24
Contact:	Brian Crumbo	Start Time	4:00 PM
E-Mail:	Brian.crumbo@oldham.kyschools.us	End Time	
Other:	502 541 2260		9 8 2
Vehicle T	pe: Motor Coach		
Transport	ation Detalls	-	
3/21/24			
4:00 PM	Arrive prepared for loading at North Old	dham HS	3 8 7
	1815 South, 1801 KY-1793, Goshen,	KY 40026	
4:30 PM	Depart to Birmingham, AL		
	Address TBD		
3/22/24- 3/23/24	-		
TBD	Depart to Mobile/Gulf Shores	4	· ·
	*local service to be provided		
3/24/24			
Morning	Depart back to North Oldham HS	,	
	1815 South, 1801 KY-1793, Goshen, R	KY 40026	
		`	
Additional (comments: Client is responsible for driver's lodg	ging.	4
Charter Fee	S		\$6,495.00
			1

□10%

□15%

□ 20%

□ Other

Client:	North Oldham	HS		1	Contract:			
Contact:	: Brian Crumbo							
E-Mail:	Brian.crumbo@	@oldham.kyschools.us	1					
Other:	502 541 2260	0						
				,				
CARD #		7	EXP	RATION DATE:		CVC #		
CARD HO	LDER NAME							
COMPAN	Y NAME							
BILLING	BILLING ADDRESS							
The Sandollar to The fourteen (1 The eight (48) in the trip dept (47) hours of the tri	is policy is hereby of schedule drivers e client may reque 4) days prior to their e client may reque nours prior to their refunds are availed their date of seigner and client may add seigner and contract barture. Sandollar e Client is responsissenger, whether ate charter at any llegal activities. Since failures or situation ponsible for any of may cause. Sandove written notice at the event of an occition of the event of	st a fifty percent (50%) referedate of service. able to a client for any carvice. ervices to their initial chart ar requires a \$200, non respect to the prize. The balance of the has a no tobacco use possible for passengers and as by accident, neglect or into a time without refund if the andollar shall not be respons deemed as 'Act of God damage that our electronical collar reserves the right to and sent a new contract the currence beyond our contract, the driver must have a moduly. Client assumes full the vertime, damage fees, or eparture must be approved us DOT hours of service at a line in the case of an excess pills/stains, any physical arges will be based on the credit card, with or without AGREE TO THE ABOVE T	fund if the ancellation ancellation ancellation are with no efundable charter milicy in all essumes furtent. We allow the devices add a function of the excessive of the color of the color of the excessive of the color of the colo	reservation is canced made when their compensity, additional repensity, and four vehicles. This lift financial responsibilities for any delays or increase to physical persurcharge should charter date. We recel contract. Upon recel contract date was ations. Any expenses gree of \$200., we receive the provided by the profor original contract D CONDITIONS.	ervation is care lled between ancellation re ates may app tions at the ti minimum of includes sme ility for article endangering conveniences nicrophones, property or are it become ne eserve the rig eaching a des urs off duty be payments du be required. fiter departure related to iti will provide d a result of ce fessional doing to price and to couisville, Ke	thirteen (1 equest is welly me booking, vaping amage to we get in well amage to well amage to the safe due to train andios, and in the substitution, if the fore local is at the enterary postituents action the clear additional in the clear additio	g. This depotent at vithin forty-seg. This depotent and check the cause operation of affic, unforced DVD player niences than this even titute alternate departure at departure tion for anyons. If additional charge to charge	d forty seven osit is rior to ewing dollar of the eseen ers we et the tyou native arter, nerary ited if shall /thing tional pairs. ges if

Date: ____

Accepted by Sandollar: ___



DRIVER SIGNATURE:

Sandollar Limousine

Office: 321 Outer Loop Hwy Louisville , KY 40214 Phone: (502) 366-2628 Email: Evan@sandollarlimo.com

Contract:	
Driver:	

Client:	Nor	th Oldham HS	Date of Service	3/21/24-3/24/24				
Contact:	Bria	n Crumbo	Start Time	4:00 PM				
E-Mail:	Bria	nn.crumbo@oldham.kyschools.us	End Time					
Other:	502	2 541 2260						
Vehicle T	ype:	Motor Coach						
Transport	atio	n Details						
	_							
3/21/24	_							
4:00 PM	Α	Arrive prepared for loading at North Oldham HS						
	1	815 South, 1801 KY-1793, Goshen, K	Y 40026					
4:30 PM	D	epart to Birmingham, AL						
	A	Address TBD						
	_							
3/22/24 3/23/24								
TBD	D	Depart to Mobile/Gulf Shores						
	*	ocal service to be provided		9 - 2				
3/24/24	+			S /				
Morning	Depart back to North Oldham HS							
	18	315 South, 1801 KY-1793, Goshen, KY	Y 40026					
Additional (Client is res		nents: sible for driver's lodg i ng.		-				
ly Signing bel	ow, yo	ou are verifying that the services listed above have t	been completed					
CLIENT'S SIG	NATL	IRE: grywnul	DATE:	1129				
Office Use Onl Orivers, by sign Insuring the v	ning b	elow you are verifying that you have completed a fu has at least one half tank of gas. Please list damag	III inspection of the vehicle in	cluding removal of trash as well as				

DATE:



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/4/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on

-	f SUBROGATION IS WAIVED, subj. his certificate does not confer rights	to th	e cer	terms and conditions of tificate holder in lieu of s	uch en	dorsement(s)		require an endorsemen	ıt. A s	tatement on
PRODUCER Louisville / AssuredPartners NL					CONTACT Judy Marrillia					
435	i North Whittington Parkway, Sulte 30 ulsville, KY 40222	00			PHONE (A/C, No, Ext): (502) 259-9251 1251 FAX (A/C, No): (502) 594-8602 E-MAIL: judy.marrillia@assuredpartners.com					594-8602
LO	118VIII6, NY 40222				ADDRE	,				T
								RDING COVERAGE		NAIC#
ING	URED				-	ERA: RLI Ins	urance Col	mpany		13056
""	Sandollar Yacht and RV Sa	les			INSURER 8 :					
	Sandollar Limousine DBA	Amer	lcan	Coach Travel	INSURER C:					-
	321 Outer Loop Louisville, KY 40214				INSURI					
	200000000000000000000000000000000000000				INSURI					
CC	VERAGES CEI	RTIFI	CAT	E NUMBER:	MOON	ERT.		REVISION NUMBER:		
II C	HIS IS TO CERTIFY THAT THE POLIC NDICATED. NOTWITHSTANDING ANY ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	REQU PER	IREM	ENT, TERM OR CONDITIO	N OF A	ANY CONTRA	CT OR OTHE	RED NAMED ABOVE FOR T R DOCUMENT WITH RESPI	FCT TO	WHICH THIS
LTR	TYPE OF INSURANCE	ADDI	SUBF	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMIT	rs	
	COMMERCIAL GENERAL LIABILITY					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		EACH OCCURRENCE	\$	
	CLAIMS-MADE OCCUR					-		DAMAGE TO RENTED PREMISES (Ea occurrence)	s	
								MED EXP (Any one parson)	s	
								PERSONAL & ADV INJURY	\$	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	
	POLICY PRO-			9				PRODUCTS - COMP/OP AGG	S	
A	OTHER:	-	-					COMBINED SINGLE LIMIT	S	F 200 000
^	AUTOMOBILE LIABILITY			(EDDOGGEOF		0/0/0000	0/0/0004	COMBINED SINGLE LIMIT (Ea accident)	\$	5,000,000
	ANY AUTO OWNED AUTOS ONLY X SCHEDULED AUTOS			LFB0019585		2/2/2023	2/2/2024	BODILY INJURY (Per person)	S	
								BODILY INJURY (Per accident) PROPERTY DAMAGE		
	X HIRED ONLY X NON-OWNED							PROPERTY DAMAGE (Per scoldent)	\$	
-	UMBRELLA LIAB OCCUR	+-	-					2	\$	
	EXCESS LIAB CLAIMS-MADE							EACH OCCURRENCE	\$	
	DED RETENTION \$				•			AGGREGATE	\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		<u> </u>					PER OTH-	\$	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Manda(ory in NH)	N/A						E.L. EACH ACCIDENT	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT		
	TESS. III (1017 C) C) ET ON TONG BOILDIN							E.L. DISEASE - POLICY LIMIT	\$	
				er						
DESC	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LEB (A	ACORE	l O 101, Additional Remarks Schedu	lo, may b	e attached if mor	s space la requi	red)	5	
	· ·									
CEF	RTIFICATE HOLDER				CANC	CELLATION				
Oldham County Board of Education 6165 W KY 146 Crestwood, KY 40014				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE						
	,			3	0	ce 35	2			_ =1

JAN 1 0 2024

OLDHAM COUNTY BOARD OF EDUCATION ADMINISTRATIVE REGULATION

OCBE - TEACHING & LEARNING TRIP BUS REQUEST FORM

Related to: Policy 8005, 4055, 8005AR; 8005.001F

8005.01F

OVERNIGHT 🔽	EXTENDED DAY (Same day but extends beyond the school day) DAY TRIP ONLY
School: South Oldham High School	(Same all) on chemic coyona me senser any)
Employee(s) In Charge: Justin Romney	Group: Choir
Destination: Hyatt Regency downtown Lo	puisville
Date(s) of Trip: 02/07/2024	Time of Departure: 12:00 P.M. Time of Return: 11:00 P.M.
Approximate Mileage (one way):2	
Approximate Number of Students:1	3
Number of Chaperones/Adults: 1	
TOTAL TRANSPORTED: 14	*
Number of Buses:1	_
*{44 Person Maximum for MS/HS} {60 Person N *These numbers include both students and all adu	faximum for ELEM} alts (bus driver, teachers, coaches, chaperones, etc.)
Method of Transportation (if not by school b	ous):
All tolls are the responsibility of the school or g	should have the $8005.02F$ accompanying this form roup requesting the trip.
Trip Required or Optional: Optional	
If optional, indicate student charges: Transportation (mileage, of Admissions Other	\$ <u>50</u> \$ <u>200</u>
Total C	harges \$ <u>265</u>
Number of Instructional Days Lost: 2.5	- -
Justification: Why is the trip necessary? Wh	at is to be learned? How will the experience be used and evaluated?
Participation in the KMEA All-State Cho	ir. Field trip goes from 2/7 to 2/9.
	, , , , , , , , , , , , , , , , , , ,
1	
Requested by: Justin Romney	Date: 01/08/2024
A	PPROVAL/DISAPPROVAL
Approved/Disapproved/MUNIC	1 100010 , Principal Date: 1-8-04
Approved/Disapproved:	Level Director Date: 1/14/24
Approved/Disapproved:	, Superintendent Date:
*Field trips in excess of a 60-mile radius of the Board	office require the approval of the Superintendent.
*ALL Overnight Field Trips and trips using Common	Carriers must be approved by the school board and Superintendent.

Upon approval, the school will receive an approved form from the Superintendent. *



OLDHAM COUNTY BOARD OF EDUCATION ADMINISTRATIVE REGULATION

FIELD TRIP BUS REQUEST FORM Related to: Policy 8005, 4055, 8005AR; 8005.001F

OVERNIGHT V	EXTENDED DAY DAY TRIP ONLY (Same day but extends beyond the school day)
School: North Oldham High School	(Same day but extends beyond the school day)
Employee(s) In Charge: Kiley Handley	Group: Student Y Club
Destination: Louisville Marriott Downtow	n-280 W Jefferson St, Louisville, KY 40202
Date(s) of Trip: 3/24/24-3/26-24	_ Time of Departure: 3 pm Time of Return: 11 am
Approximate Mileage (one way): 14 r	miles *
Approximate Number of Students:	45
Number of Chaperones/Adults: 2-	3
TOTAL TRANSPORTED: NA	*
Number of Buses: NA	
*{44 Person Maximum for MS/HS} {60 Person I *These numbers include both students and all ad	Maximum for ELEM; ults (bus driver, teachers, coaches, chaperones, etc.)
Method of Transportation (if not by school	bus): Car
*Common Carriers must be Board approved and *All tolls are the responsibility of the school or g	l should have the 8005.02F accompanying this form* troup requesting the trip.
Trip Required or Optional:	
If optional, indicate student charges: Transportation (mileage, of Admissions Other Total C	\$ 275 \$ 10
Number of Instructional Days Lost: 2	*
Justification: Why is the trip necessary? Wh The Kentucky United Nations Assembly students participate directly in simulated to experience the richness of cultures fr	at is to be learned? How will the experience be used and evaluated? (KUNA) is a 3-day, experiential-learning conference in which d international diplomacy. KUNA offers students the opportunity om around the world, develop empathy, and hone their critical le variety of perspectives and global issues.
Requested by: Kiley Handley	Date: 01/10/2024
. 0	PPRØVAL/DISAPPROVAL
Approved/Disapproved: Approved/Disapproved: Approved/Disapproved:	, Level Director Date:, Superintendent Date:
*Field trips in excess of a 60-mile radius of the Board *ALL Overnight Field Trips and trips using Common C	•
Upon approval, the school will receive an approved for	



OLDHAM COUNTY BOARD OF EDUCATION ADMINISTRATIVE REGULATION

FIELD TRIP BUS REQUEST FORM

Related to: Policy 8005, 4055, 8005AR; 8005.001F

	ATENDED DAY DAY TRIP ONLY ame day but extends beyond the school day)
School: North Oldham High School	ame way but esterna beyona me school dayy
Employee(s) In Charge: Kiley Handley, Head	Swimming Coach Group: Boys and Girls Swimming
Destination: State Swim Championships, Le	
Date(s) of Trip: 2-22/2-24-24	ime of Departure: TBD Time of Return: TBD
Approximate Mileage (one way):80	*
Approximate Number of Students: 10	
Number of Chaperones/Adults:2	
TOTAL TRANSPORTED: 12	*
Number of Buses:0	
*{44 Person Maximum for MS/HS} {60 Person Maximum for MS/HS} and all adults	(bus driver, teachers, coaches, chaperones, etc.)
Method of Transportation (if not by school bus)	: PARENT TRANSPORT
*Common Carriers must be Board approved and sho *All tolls are the responsibility of the school or grou	
Trip Required or Optional: Required	
If optional, indicate student charges: Transportation (mileage, drive Admissions Other	ss
Total Char	rges \$
Number of Instructional Days Lost: 2	
	s to be learned? How will the experience be used and evaluated?
Requested by: Matt Walker, NOHS Athletics	Director
APPI	ROVAL/DISAPPROVAL
Approved/Disapproved:	Principal Date: 1/11/2027
Approved/Disapproved:	, Level Director Date: 1/16/24
Approved/Disapproved:	, Superintendent Date:
*Field trips in excess of a 60-mile radius of the Board offic *ALL Overnight Field Trips and trips using Common Carr	ce require the approval of the Superintendent. iers must be approved by the school board and Superintendent.
Upon approval, the school will receive an approved form fr	