STUDENTS BEECHWOOD INDEPENDENT SCHOOLS 09.36 AP.21 TRANSPORT/FIELD TRIP REQUEST FORM TODAY'S DATE 2-27-24 Kêlementary 🗆 High School 🗅 Guardian Angel Faculty/Staff/Coach/Sponsor(s) RACHEL FAIT Date(s) of Trip 3/15/24 Departure Time 4:00 Pm Return Time 6:00 Pm 3/16/24 *If Peanut/Tree Nut Allergy Safety Alert is checked on the School-Related Trip Permission Slip and Medical Release Form (09.36 AP.211) then faculty/staff member(s) sponsoring this trip are responsible to ensure buses/mode of transportation comply with procedure related to foods on trip. Also, staff are required to know where AED's are located if applicable. SEE BELOW. TYPE OF TRIP (CHECK ONE): □ Classroom Field Trip, Specify Class ____ □ Class Trip (i.e. Junior, Senior) ,Specify__ □ Organization/Club Trip, Specify ____ □ Other (athletic, band), Specify____ **DESTINATION Back Co. M.S. Miles (one way) to destination: 120 City/State Daville Ky TRANSPORTATION (to be completed by Requestor) FORM has been completed and approved by Jim Swift and is on the Transportation Spreadsheet. **Does the trip exceed 100 miles? Yes - No If Yes, trip requires Board of Ed approval. See Below. □ Private Vehicle, if allowed by policy.SpecifyDriver(s)_____ Number of: Students Going on Trip TBA Faculty/Staff 2 Other Chaperones____ ARE ALL CHAPERONES ON THE VOLUNTEER LIST? I YES I NO IF NO, THEY WILL NEED TO COMPLETE THE YOUTH LEADER FORM AND BE APPROVED PRIOR TO CHAPERONING. AND SUPERVISION - Attach a list of names of adults accompanying students on trip. Trip Approved ₩es □No Principal Signature Date_ Trip Approved _ Signature Date 2-27-

Related Procedures: 09.36 AP.211, 09.36 AP.212, 09.36 AP.23 Review/Revised: November 2018 Page 1 of 1

□Yes □No Board of Education if applicable

MUST COMPLETE PAGE 2 AS WELL and turn in with request form.

Signature Date