

## School Field Trip Packet - Overnight Greater than 100 miles with District Transportation

Organization: **Marion County Public Schools**      Employee: **TARA WADE**  
 Assigned To: **User - kim.hood**  
[Show History](#)

**NOTE: Field trip packets that require Board approval will only be approved at the first regular board meeting each month.**

 **School Professional Leave**

03.125 AP.21

* Employee Name	Tara Wade
* School/Work site	Marion County High School
* Date(s) of leave	04/08/2024-04/10/2024
* Time of departure	10:00 am
* Destination	Galt House, Louisville, KY
* Purpose/Rationale for attending	FBLA State Leadership Conference
* Number of students involved	20

\* Substitute needed (please remember to enter your absence in Aesop, even if a substitute is not required.)      Yes

*Number of days (Avg. \$100 a day)*      3

*Substitute code*      Perkins

\* Registration      Yes

*Registration cost*      60

*Registration code*      Perkins

\* Mileage      No

*Number of miles*

*Number of days*

\* Lodging      Yes

*Cost per night*      190

*Number of nights*      2

*Lodging rate*      Conference Rate

\* Meals      Yes

*Estimated **total** meal cost*      80

*Meals/Mileage/Parking/Lodging Code*      Perkins

\* Grand total of expenses      820

**\*An overnight stay is required for reimbursement of any meals. Any meal exceeding \$5.00 must be substantiated by an itemized receipt. Maximum allowable food expenditure per day shall be \$40.00 in state and \$46.00 out of state. For lodging to be reimbursed, an original, itemized receipt is required. Registration fees, parking tolls, etc. may be reimbursed with original receipts. Credit card slips, registration forms, or check copies are not accepted as receipts. A Travel Voucher (03.125 AP.22) must be completed after the conference/workshop, etc., to receive reimbursement for actual expenses.**

Notes

Reviewed/Revised: 01/12/2015

 **School-Related Student Trip Request Form**

09.36 AP.21

- \* Faculty member(s) sponsoring trip Tara Wade
  - \* Type of trip (i.e. classroom, organization, club, athletic, band) FBLA
  - \* Destination name Galt House
  - \* Destination address 140 N. Fourth Street, Louisville, KY
  - \* Destination phone 502-589-95200
  - Lodging name* Galt House
  - Lodging address* 140 N. Fourth Street, Louisville, KY
  - Lodging phone* 502-589-95200
  - \* Date(s) of trip 04/08/24-04/10/2024
  - \* Time of departure 12:00 pm
  - \* Purpose/Educational value FBLA state conference
  - \* Source of funding for trip Lavec/Perkins
- No student shall be denied the trip because of the inability to pay.*
- \* Bill trip expenses to (i.e. Sponsoring organization, school council, Board) Lavec/Perkins
  - \* Number of students 20
  - \* Number of faculty sponsors 1
  - \* Other chaperones 0
  - \* Total number of participants 21
  - \* Supervision (Attach list of names of students and chaperones)

FBLA State Competition.pdf Added 3/8/2024 12:08:00 PM	<a href="#">view</a>
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Add a File

- \* Have all chaperones undergone the required records check and been designated by the principal/designee to supervise students? Yes

Reviewed/Revised: 01/12/15

**School Bus Request**



This authorization for the use of this vehicle is valid for the use of said vehicle as a "School Bus" and for no other purpose.

\* Buses needed 1

*\*If more than one bus is needed, please submit a 'School Bus Request' form for each additional bus.*

\* Destination Galt House

\* Date(s) of trip 04/08/2024-04/10/2024

\* Group requesting bus FBLA

\* Purpose of trip State Leadership Conference

\* Bus pick-up time 12:00 pm

\* Bus return time 10:30 am

\* When transporting items that cannot be held in lap of students, under storage will be required to store these items. Under storage will not be required

\* Account to be charged Lavec

[Blank Student List Template](#)

\* Faculty supervision will be provided for this trip. At least one member of our faculty will ride in each bus. A copy of the list of pupils that are assigned to ride this particular school bus can be uploaded below. The driver will be given a copy and the school should also keep a copy of all riders on file.

FBLA State Competition.pdf  
Added 3/8/2024 12:10:00 PM

[view](#)

\* Employee Signature

Signed: **Tara Wade**  
Stamped: Fri Mar 08 2024 13:10:31 GMT-0500 (Eastern Standard Time); 3/8/2024 12:10:31 PM; 2024-03-08 18:10:31Z; 170.185.150.17; Employee - #356 - TARA WADE

\* Principal Signature

Signed: **Robby Peterson**  
Stamped: Fri Mar 08 2024 14:13:45 GMT-0500 (Eastern Standard Time); 3/8/2024 1:13:46 PM; 2024-03-08 19:13:46Z; 170.185.150.17; Employee - #371 - JOSEPH PETERSON

\* Direct this field trip packet to

\* Supervisor Signature

Not Signed Read-Only

\* Field Trip Designee Signature

Not Signed Read-Only

\* Date of Board approval

\* Superintendent Signature

Not Signed Read-Only

This section is to be completed by the Transportation Director.

- \* Bus number
- \* Driver
- \* Driver wage
- \* Transportation Director Signature/Date

This section is to be completed by the driver and filed in the Transportation Director's office upon completion of the above trip.

- \* Ending odometer reading
- \* Beginning odometer reading
- \* Total miles
- \* Number transported
- \* Driver Signature/Date

**Approve**

**Deny**