Extended Field Trip Request & Forms

(In excess of 150 Miles, Overnight, Out-o	f-State or use by Common Carrier)
This form must be completed and sent to the Superinte Owell County Board of Education prior to the planned Vallability.	endent in time to be placed on the agenda of the trip date. Safety and liability issues, as well as the all areas of Board responsibility.
ALL ITEMS MUST BE COMPLETED F	OR TRIP TO BE CONSIDERED.
RGANIZATION OR GROUP GINS SOCCER	Estimated # OF STUDENTS ELIGIBLE FOR TRIP
ATE(S) OF TRIP (Including Travel) Aug 16-18, 74	- #Of School 2
PONSOR'S NAME VICTORIA SPUNCUE IALE CHAPERONES FEMALE CHAPERONE OCATION(S): SUCCEY TOUTH A MENT	<u>s_2</u>
ITY/STATE: MUHERPESONO, IN	
ITY/STATE: MUHICESDOPO, TN	Linear Warrand medical professional is
For out of state trips, please check here if medical	assistance from a licensed medical professional is
ITY/STATE: MUHICESDOPO, TN	assistance from a licensed medical professional is be notified of trip.
For out of state trips, please check here if medical	assistance from a licensed medical professional is be notified of trip.
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For out of state trips, please check here if medical	assistance from a licensed medical professional is be notified of trip.
For out of state trips, please check here if medical required for any students on trip. School nurse MUST	be notified of trip.
For out of state trips, please check here if medical required for any students on trip. School nurse MUST TRANSPORTATION PROVISIONS: Powell County Public School bus	Travel Firm:
For out of state trips, please check here if medical required for any students on trip. School nurse MUST TRANSPORTATION PROVISIONS: Powell County Public School bus Commercial Travel; Insurance Coverage Provided by Why is a Commercial Carrier being used in lieu of a Forward Private Travel (Review 09.36 AP.2: Restrictions, pare)	Travel Firm: Powell County School Bus? Int notification, driver notification.)
For out of state trips, please check here if medical required for any students on trip. School nurse MUST TRANSPORTATION PROVISIONS: Powell County Public School bus Commercial Travel; Insurance Coverage Provided by Why is a Commercial Carrier being used in lieu of a Forward Private Travel (Review 09.36 AP.2: Restrictions, pare)	Travel Firm:

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P.	COST OF TRIP			
Estimated Total Cost of Trip \$ 1 (φ50,00 + 750.00)	Meals/Lodging/Transportation			
\$ 450 \$ 2,850.00	Name of Facility and City for Additional Expenses (Specify) Toum. 6	Lodging ee		
How Expenses of Trip Are to B	e Paid			
\$ 2850.00	School or District Amount From	ev acct.	Source	
3	Association or Parent Group (Specify)			
•	Student's Share (Individual Amount \$			
	Terms of the student fee waiver policy apply to within the instructional day.	all trips that	are schedules	
s_2850	**TOTAL PAYMENT MUST MATCH ABOVE**	TOTAL C	COST	
PLEASE CHECK TO INDICATE THE	HE FOLLOWING ITEMS HAVE BEEN A	DDRESSEI):	
Field Trip Policy & Procedures & For		Yes	□No	
List of Students Participating Attached		☐ Yes	□No	
Cost of Trip Completed		Yes	□No	
Complete Itinerary of the Trip Attached		☐ Yes	□No	
Educational Plan for the Trip Attached (if instructional in nature)			No	
PRIOR to trip, sponsor will ensure	completion			
OAll Chaperones are on the Approved Volunteer List & Approved by Principal				
DList of Chaperones completed (Mark whether teacher, parent, etc.)			□ No	
DField Trip Policy & Procedures have been reviewed by all chaperones on trip			□ No	
of total find following or trooperates have	occurrence by an enaperones on urp	Yes	□No	
Per Kentucky regulations, all trip fo	rms/signatures shall be retained at schoo	l for five (5	i) years.	
accept the responsibility of seeing that accordance with Board Policies, Add	at the above event is represented accurately ministrative Procedures, and any applicable	and shall be selected cou	pe carried out incil policies.	
Signature: Trip Sponsor Date Signature: Principal Approval Date				