

COMPLETE ALL INFORMATION AND RETURN TO TRANSPORTATION

STUDENTS

BEECHWOOD INDEPENDENT SCHOOLS
TRANSPORTATION/FIELD TRIP REQUEST FORM

09.36 AP.21

TODAY'S DATE 7/15/24

Elementary

High School

Guardian Angel

Faculty/Staff/Coach/Sponsor(s) Boox H

Date(s) of Trip 7/21/24 - 7/30/24 Departure Time 9:00 AM Return Time 4:00 PM

**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.*

TYPE OF TRIP (CHECK ONE):

Classroom Field Trip, Specify Class _____

Class Trip (i.e. Junior, Senior), Specify _____

Organization/Club Trip, Specify _____

Other (athletic, band, if applicable), Specify Boys Golf Team

**DESTINATION Kennedy Hills Golf Club Miles (one way) to destination: 60

City/State Georgetown, KY

Overnight: Give name of lodging and address _____

TRANSPORTATION

____ Number of Buses needed (1 driver per bus unless otherwise indicated) or Suburban Van
See 09.36 AP.212

**Does trip exceed 100 miles? Yes No If Yes, trip requires Board of Education approval.

THIS SECTION COMPLETED BY TRANSPORTATION DEPARTMENT

Bus Available Yes No Suburban Available Yes No Van Available Yes No

Bus # _____ has been reserved.

Transportation Supervisor _____
Signature _____ Date _____

Use of Common Carrier in Lieu of School Bus Procedure 09.36
(Complete Use of Common Carrier form, requires Board of Education approval)

Private Vehicle, if allowed by policy. Specify Driver(s) _____

Purpose/Educational Value Boys Golf Journey + Private Round

Number of days absent from school 0 Number of: Students Going on Trip 7 Faculty/Staff 2

Other Chaperones N/A ARE ALL CHAPERONES ON THE VOLUNTEER LIST? YES NO
IF NO, THEY WILL NEED TO COMPLETE THE YOUTH LEADER FORM AND BE APPROVED PRIOR TO CHAPERONING.

SUPERVISION - Attach a list of names of adults accompanying students on trip. Boox H / Schneider

Trip Approved
 Yes No Principal [Signature] Date 7/15/2024

Trip Approved
 Yes No Superintendent/Designee _____
Signature _____ Date _____

Yes No Board of Education _____
Signature _____ Date _____