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

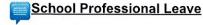
Organization: Marion County Public Schools

Employee: JESSICA JOHNSON

Assigned To: User - kim.hood

**Show History** 

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



03.125 AP.21

Employee Name

Jessica Johnson

School/Work site

Marion County High School

Date(s) of leave

April 22-25, 2025

Time of departure

09:00 am

Destination

Galt House Hotel and Suites

Purpose/Rationale for attending

State FCCLA Leadership Conference, Students competing, and receiving awards

Number of students involved

12

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

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

4

Substitute code

Perkins

Registration

Yes

Registration cost

120.00

Registration code

Perkins

Mileage

No

Number of miles

Number of days

Lodging

Yes

Cost per night

219.00

Number of nights

3

Lodging rate

Conference Rate

₩ Meals

Yes

Estimated total meal cost

120.00

Meals/Mileage/Parking/Lodging Code

Perkins

1,297.00

\*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 Jessica Johnson

\* Type of trip (i.e. classroom, organization, club, Marion County High School athletic, band)

Restination name Galt House Hotel and Suites

★ Destination address
140 N Fourth St, Louisville, KY 40202

Destination phone
8593192825

Lodging name Galt House Hotel and Suites

Lodging address 140 N Fourth St, Louisville, KY 40202

Lodging phone (502) 589-5200

★ Date(s) of trip April 22-25

₩ Time of departure 09:00 am

Purpose/Educational value

State Leadership Conference, Student competing and receiving awards

Source of funding for trip 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)

Board/ Perkins

Number of students
13

Number of faculty sponsors
2

Total number of participants
15

Supervision (Attach list of names of students and chaperones)

State Leadership Conference 2025.docx Added 3/4/2025 7:46:00 PM

view

#### Add a File

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

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 Hotel

Date(s) of trip

April 22-25

Group requesting bus

**FCCLA** 

Purpose of trip

State Leadership Conference

Bus pick-up time

09:00 am

Bus return time

02:30 pm

Required when transporting items that cannot be held in Under storage will be required lap of students, under storage will be required to store these items.

Board/CTE Funds

#### Blank Student List Template

Account to be charged

🏶 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.

## State Leadership Conference 2025.docx

view

Added 3/4/2025 7:47:00 PM

#### 🏶 Employee Signature

#### Signed: Jessica Johnson

Stamped: Tue Mar 04 2025 20:47:30 GMT-0500 (Eastern Standard Time); 3/4/2025 7:47:30 PM;2025-03-05 01:47:30Z;170.185.150.201;Employee - #346 -JESSICA JOHNSON

By typing in your name (your "eSignature"), you accept and consent to be legally bound by this document's statements, terms and conditions as if this document was signed by you in writing with pen on paper. You agree that no third party or other means of verification is necessary to validate your eSignature and that the lack of such third party or other means of verification will not in any way affect the enforceability of this document.

#### 🏶 Principal Signature

#### Signed: Robby Peterson

Stamped: Wed Mar 05 2025 09:08:15 GMT-0500 (Eastern Standard Time); 3/5/2025 8:08:15 AM;2025-03-05 14:08:15Z;170.185.150.186;Employee - #371 - JOSEPH PETERSON

By typing in your name (your "eSignature"), you accept and consent to be legally bound by this document's statements, terms and conditions as if this document was signed by you in writing with pen on paper. You agree that no third party or other means of verification is necessary to validate your eSignature and that the lack of such third party or other means of verification will not in any way affect the enforceability of this document.

Direct this field trip packet to

## \* Supervisor Signature

Not Signed

Read-Only

By typing in your name (your "eSignature"), you accept and consent to be legally bound by this document's statements, terms and conditions as if this document was signed by you in writing with pen on paper. You agree that no third party or other means of verification is necessary to validate your eSignature and that the lack of such third party or other means of verification will not in any way affect the enforceability of this document.

## Field Trip Designee Signature

Not Signed

Read-Only

By typing in your name (your "eSignature"), you accept and consent to be legally bound by this document's statements, terms and conditions as if this document was signed by you in writing with pen on paper. You agree that no third party or other means of verification is necessary to validate your eSignature and that the lack of such third party or other means of verification will not in any way affect the enforceability of this document.

- Date of Board approval
- ₩ Superintendent Signature

Not Signed

Read-Only

By typing in your name (your "eSignature"), you accept and consent to be legally bound by this document's statements, terms and conditions as if this document was signed by you in writing with pen on paper. You agree that no third party or other means of verification is necessary to validate your eSignature and that the lack of such third party or other means of verification will not in any way affect the enforceability of this document.

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** 

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

Organization: Marion County Public Schools

Employee: JESSICA JOHNSON

Assigned To: User - kim.hood

**Show History** 

Remove Applicants or Employees

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

School Professional Leave

03.125 AP.21

Employee Name

Jessica Johnson

★ School/Work site

Marion County High School

Date(s) of leave

June 28-30

\* Time of departure

08:00 am

Destination

FCCLA Leadership Camp

🟶 Purpose/Rationale for attending

Regional officers will get officer training, students will develop leadership skills and learn more about FCCLA.

Number of students involved

5

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

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

Substitute code

Registration

Yes

Registration cost

150.00

Registration code

Perkins

Mileage

No

Number of miles

Number of days

Lodging

No

Cost per night

Number of nights

Lodging rate

Meals

No

Estimated total meal cost

Meals/Mileage/Parking/Lodging Code

Grand total of expenses

150.00

\*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

Jessica Johnson

Type of trip (i.e. classroom, organization, club, FCCLA athletic, band)

Destination name

FFA Leadership Training Center

Destination address

111 Ffa Camp Rd, Hardinsburg, KY 40143

Destination phone

(270) 756-2301

Lodging name

Same

Lodging address

Lodging phone

Date(s) of trip

June 28-30, 2025

Time of departure

08:00 am

Purpose/Educational value

Regional officers will get officer training, students will develop leadership skills and learn more about FCCLA.

Source of funding for trip

Board- Perkins

No student shall be denied the trip because of the inability to pay.

Rill trip expenses to (i.e. Sponsoring
organization, school council, Board)
80

**Board-Perkins** 

Number of students

5

2

Other chaperones

0

🗱 Total number of participants

Number of faculty sponsors

Supervision (Attach list of names of students and chaperones)

State Leadership Conference 2025.docx Added 3/5/2025 11:43:00 AM

view

#### 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



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

111 Ffa Camp Rd, Hardinsburg, KY 40143

Date(s) of trip

June 28-30

Group requesting bus

**FCCLA** 

Purpose of trip

Camp

Rus pick-up time

08:00 am

Rus return time

04:00 pm

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

Account to be charged

MCHS FCCLA

#### 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.

#### State Leadership Conference 2025.docx Added 3/5/2025 11:44:00 AM

view

## Employee Signature

#### Signed: Jessica Johnson

Stamped: Wed Mar 05 2025 12:43:44 GMT-0500 (Eastern Standard Time);3/5/2025 11:43:44 AM;2025-03-05 17:43:44Z;170.185.150.201;Employee - #346 -JESSICA JOHNSON

By typing in your name (your "eSignature"), you accept and consent to be legally bound by this document's statements, terms and conditions as if this document was signed by you in writing with pen on paper. You agree that no third party or other means of verification is necessary to validate your eSignature and that the lack of such third party or other means of verification will not in any way affect the enforceability of this document.

#### Principal Signature

#### Signed: Robby Peterson

Stamped: Wed Mar 05 2025 13:56:19 GMT-0500 (Eastern Standard Time);3/5/2025 12:56:19 PM;2025-03-05 18:56:19Z;170.185.150.186;User - robby.peterson robby.peterson@marion.kyschools.us

By typing in your name (your "eSignature"), you accept and consent to be legally bound by this document's statements, terms and conditions as if this document was signed by you in writing with pen on paper. You agree that no third party or other means of verification is necessary to validate your eSignature and that the lack of such third party or other means of verification will not in any way affect the enforceability of this document.

\* Direct this field trip packet to

~

Supervisor Signature

Not Signed

Read-Only

By typing in your name (your "eSignature"), you accept and consent to be legally bound by this document's statements, terms and conditions as if this document was signed by you in writing with pen on paper. You agree that no third party or other means of verification is necessary to validate your eSignature and that the lack of such third party or other means of verification will not in any way affect the enforceability of this document.

\* Field Trip Designee Signature

Not Signed

Read-Only

By typing in your name (your "eSignature"), you accept and consent to be legally bound by this document's statements, terms and conditions as if this document was signed by you in writing with pen on paper. You agree that no third party or other means of verification is necessary to validate your eSignature and that the lack of such third party or other means of verification will not in any way affect the enforceability of this document.

- Date of Board approval
- Superintendent Signature

Not Signed

Read-Only

By typing in your name (your "eSignature"), you accept and consent to be legally bound by this document's statements, terms and conditions as if this document was signed by you in writing with pen on paper. You agree that no third party or other means of verification is necessary to validate your eSignature and that the lack of such third party or other means of verification will not in any way affect the enforceability of this document.

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** 

# School Field Trip Packet - OvernightGreater than 100 miles without District Transportation

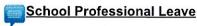
Organization: Marion County Public Schools

Employee: JAMIE BROWN

Assigned To: User - kim.hood

**Show History** 

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



03.125 AP.21

🏶 Employee Name

Jamie Brown

School/Work site

Marion County High School

Date(s) of leave

June 21-27, 2025

Time of departure

07:00 am

Destination
Orlando, FL

Purpose/Rationale for attending

National Beta Convention/student competitions and national officer

Number of students involved

19

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

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

Substitute code

Registration

No

Registration cost

Registration code

Mileage

No

Number of miles

Number of days

Lodging

No

Cost per night

Number of nights

Lodging rate

Meals

No

Estimated total meal cost

Meals/Mileage/Parking/Lodging Code

₩ Grand total of expenses

0

\*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

We are starting the CAN and background checks for all adults on 3/6/25.

Reviewed/Revised: 01/12/2015

## School-Related Student Trip Request Form

00	.36	Λ	00	1
us	.30	А	P. /	9

Faculty member(s) sponsoring trip Jamie Brown, Sterling Newton, Erin Benton,

Laura Mattingly

🏶 Type of trip (i.e. classroom, organization, club, club athletic, band)

Destination name Courtyard Marriott/Gaylord Palms Convention

Center

Destination address 6000 W. Osceola Pkwy, Kissimmee, FL 34746

Destination phone 888-748-7190

Courtyard Orlando Lake Buena Vista in the Lodging name

Marriott Village

Club

Lodging address 8623 Vineland Ave, Orlando, FL 32821

Lodging phone 407-938-9001

Date(s) of trip June 21-27, 2025

Time of departure 07:00 am

Purpose/Educational value

attendance and competition for the National Beta Convention

Source of funding for trip student/club fundraising

No student shall be denied the trip because of the inability to pay.

Bill trip expenses to (i.e. Sponsoring organization, school council, Board)	MCHS Activity-Beta	
* Number of students	19	
* Number of faculty sponsors	4	
* Other chaperones	10	
* Total number of participants	33	

Certified common carrier Gold Shield Transportation

Private vehicle, if allowed by policy; specify Jessica Bickett, Glen Richardson (transporting driver(s) their own children)

Supervision (Attach list of names of students and chaperones)

MCHS Beta Orlando Participant List-June 21-27 2025.pdf

Added 3/5/2025 4:41:00 PM

view

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

Reviewed/Revised: 01/12/15

#### Employee Signature

### Signed: Jamie L. Brown

Stamped:Wed Mar 05 2025 17:42:21 GMT-0500 (Eastern Standard Time);3/5/2025 4:42:21 PM;2025-03-05 22:42:21Z;74.132.57.193;Employee - #321 - JAMIE BROWN

By typing in your name (your "eSignature"), you accept and consent to be legally bound by this document's statements, terms and conditions as if this document was signed by you in writing with pen on paper. You agree that no third party or other means of verification is necessary to validate your eSignature and that the lack of such third party or other means of verification will not in any way affect the enforceability of this document.

### Principal Signature

#### Signed: Robby Peterson

Stamped: Thu Mar 06 2025 07:19:53 GMT-0500 (Eastern Standard Time);3/6/2025 6:19:54 AM;2025-03-06 12:19:54Z;170.185.150.186; Employee - #371 - JOSEPH PETERSON

By typing in your name (your "eSignature"), you accept and consent to be legally bound by this document's statements, terms and conditions as if this document was signed by you in writing with pen on paper. You agree that no third party or other means of verification is necessary to validate your eSignature and that the lack of such third party or other means of verification will not in any way affect the enforceability of this document.

### Direct this field trip packet to

#### Supervisor Signature

Not Signed

Read-Only

By typing in your name (your "eSignature"), you accept and consent to be legally bound by this document's statements, terms and conditions as if this document was signed by you in writing with pen on paper. You agree that no third party or other means of verification is necessary to validate your eSignature and that the lack of such third party or other means of verification will not in any way affect the enforceability of this document.

### Field Trip Designee Signature

Not Signed

Read-Only

By typing in your name (your "eSignature"), you accept and consent to be legally bound by this document's statements, terms and conditions as if this document was signed by you in writing with pen on paper. You agree that no third party or other means of verification is necessary to validate your eSignature and that the lack of such third party or other means of verification will not in any way affect the enforceability of this document.

#### Date of Board approval

#### Superintendent Signature

Not Signed

Read-Only

By typing in your name (your "eSignature"), you accept and consent to be legally bound by this document's statements, terms and conditions as if this document was signed by you in writing with pen on paper. You agree that no third party or other means of verification is necessary to validate your eSignature and that the lack of such third party or other means of verification will not in any way affect the enforceability of this document.

	8:30	

School Field Trip Packet - OvernightGreater than 100 miles without District Transportation from Marion County Public Schools

**Approve** 

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

Employee: MAKENZIE THOMAS

Assigned To: User - kim.hood

**Show History** 

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

## School Professional Leave

Organization: Marion County Public Schools

03.125 AP.21

🗱 Employee Name Makenzie Thomas

★ School/Work site

Marion County High School

Tuesday April 15-Wednesday April 16, 2025

4

★ Time of departure
3:30 pm

Destination

Murray State University

Purpose/Rationale for attending Students will be participating in the State Poultry Contest

Rumber of students involved

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

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

Substitute code Perkins

Registration cost

Registration code

₩ Mileage No

Number of miles

Number of days

Cost per night

Number of nights

Lodging rate

₩ Meals No

Estimated total meal cost

Meals/Mileage/Parking/Lodging Code

Grand total of expenses 100

\*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

Makenzie Thomas

Type of trip (i.e. classroom, organization, club, athletic, band)

🏶 Destination name

Murray State University

**Destination address** 

1375 Chestnut St, Murray, KY 42071

🗱 Destination phone

(800) 272-4678

Lodging name

Spring Hill Suits Murray

Lodging address

1512 N 12th St, Murray, KY 42071

Lodging phone

(270) 917-8000

Date(s) of trip

April 15-16, 2025

Time of departure

4:00 pm

Purpose/Educational value

Attending the State Poultry Contest

Source of funding for trip

**FFA** 

No student shall be denied the trip because of the inability to pay.

Bill trip expenses	to (i.e. Sponsoring
organization, school	council, Board)

FFA

Number of students

1

Number of faculty sponsors

Other chaperones

1

Total number of participants

Yes

Supervision (Attach list of names of students and chaperones)

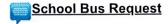
State Poultry Contest 2025.xlsx Added 3/5/2025 9:41:00 AM

view

Add a File

Representation Herein H records check and been designated by the principal/designee to supervise students?

Reviewed/Revised: 01/12/15



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

SUV

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

Destination

Murray State University

Date(s) of trip

April 15-16, 2025

Roup requesting bus

FFA

Purpose of trip

State Poultry Contest

Rus pick-up time

03:30 pm

🏶 Bus return time

5:00 pm

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

**FFA** 

\* Account to be charged

#### 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.

#### State Poultry Contest 2025.xlsx Added 3/5/2025 9:43:00 AM

view

\* Employee Signature

#### Signed: Makenzie Thomas

Stamped: Wed Mar 05 2025 10:43:13 GMT-0500 (Eastern Standard Time);3/5/2025 9:43:13 AM;2025-03-05 15:43:13Z;170.185.150.213;Employee - #668 - MAKENZIE THOMAS

By typing in your name (your "eSignature"), you accept and consent to be legally bound by this document's statements, terms and conditions as if this document was signed by you in writing with pen on paper. You agree that no third party or other means of verification is necessary to validate your eSignature and that the lack of such third party or other means of verification will not in any way affect the enforceability of this document.

#### Principal Signature

#### Signed: Robby Peterson

Stamped:Wed Mar 05 2025 13:00:16 GMT-0500 (Eastern Standard Time);3/5/2025 12:00:17 PM;2025-03-05 18:00:172;170.185.150.186;User - robby.peterson@marion.kyschools.us

By typing in your name (your "eSignature"), you accept and consent to be legally bound by this document's statements, terms and conditions as if this document was signed by you in writing with pen on paper. You agree that no third party or other means of verification is necessary to validate your eSignature and that the lack of such third party or other means of verification will not in any way affect the enforceability of this document.

- \* Direct this field trip packet to
- \* Supervisor Signature

Not Signed

Read-Only

By typing in your name (your "eSignature"), you accept and consent to be legally bound by this document's statements, terms and conditions as if this document was signed by you in writing with pen on paper. You agree that no third party or other means of verification is necessary to validate your eSignature and that the lack of such third party or other means of verification will not in any way affect the enforceability of this document.

## \* Field Trip Designee Signature

Not Signed

Read-Only

By typing in your name (your "eSignature"), you accept and consent to be legally bound by this document's statements, terms and conditions as if this document was signed by you in writing with pen on paper. You agree that no third party or other means of verification is necessary to validate your eSignature and that the lack of such third party or other means of verification will not in any way affect the enforceability of this document.

- \* Date of Board approval
- Superintendent Signature

Not Signed

Read-Only

By typing in your name (your "eSignature"), you accept and consent to be legally bound by this document's statements, terms and conditions as if this document was signed by you in writing with pen on paper. You agree that no third party or other means of verification is necessary to validate your eSignature and that the lack of such third party or other means of verification will not in any way affect the enforceability of this document.

This section is to be completed by the Transportation Director.

- Rus 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**