Request to Place an Item on the Agenda

Name Byandi francies
Telephone number:
Name of school children attend, if applicable
Group represented CLASS OF 2025
Check if request was submitted to:
Conferred with following administrators (names): LEE QUAYLES
Description of Jasues NYONEL
Specific Action Requested Permission to Travel to Holiday INONA - Santa Claus Indiana on a Charker Bus on May 14, 2025.
ANOVIA - DANTA CIAUS MAIAMA ON A
LAMATA DUS BIT THUY 191 ADAS.
Check If you are:
All requests for items to be placed on the agencia must be submitted to the Superintendent prior to the Board meeting as specified in Board Policy 01.45. Items submitted shall require prior
approval of the Superintendent.

Review/Revised 3/13/06

Chaper Bus

09.36 AP.21 **STUDENTS** School-Related Student Trip Request Form & Event Specific Emergency Action Plan (EAP) FACULTY MEMBER(S) SPONSORING TRIP WANCIES TYPE OF TRIP (CHECK ONE): Organization requesting the Trip / Organization responsible for Payment: () ass of DESTINATION HOLIDAY MOND ADDRESS Santa Claus. Overnight; give name, address, phone of lodging DATE(S) OF TRIP 5 14 25 DEPARTURE TIME 7:00 AM RETURN TIME 7:00 PM SOURCE OF FUNDING FOR TRIP NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY. NUMBER OF: STUDENTS 5 FACULTY SPONSORS 5 TOTAL # OF PARTICIPANTS (QU EAP: Person contacted at venue to discuss EAP: Is there an Automated External Defibrillator (AED) on site: Wes \(\sqrt{No If yes, where: \(\sqrt{No U G b. \(\sqrt{No III G b. \(\ Does the venue have an Emergency Response Team: Yes D No If yes, how are they contacted: School Employee(s) Attending Trip (Please note beside name if employee is CPR trained): (Please use separate sheet and attach to this form if more space is needed to list school employees attending). Approval of Site Based Council Representative **District Use Only** Section 2 Approval of District Representative DRIVER: TURN THIS FORM IN WITH TIMESHEETS Section 3 Date/Time Departure: Odometer Start: Date/Time Return: Odometer End: Thereby certify that the above information is correct to the best of my knowledge. Driver Signature Date **Driver Comments:** Coach or School Representative Signature

Date

Request to Place an Item on the Agenda
Name: Walter McContr, Lee Queles, + Mike South
Address: 806 S. Mein St. Elleton 14 42220
Telephone number: 270265-2006
Name of school children attend, if applicable: TCC HS
Group represented: Boys Barkethall
Check if request was submitted to: Superintendent Board Chairperson
Conferred with following administrators (names): Lee Quales + Mike Sall
Description of Issue: Playing in & timmer league games at White House Heritage High School in White Howe, TN on May 30-31, 20
House Heritage Aigh charlin White Howse, IN an May 30-51, 20
and and the count
Specific Action Requested: Out-of-State request
Check if you are:
All requests for items to be placed on the agenda must be submitted to the Superintendent prior to the Board meeting as specified in Board Policy 01.45. Items submitted shall require prior approval of the Superintendent.
approximation of the contraction

Request to Place an Item on the Agenda

Name: Jer Ann White, Lee Qualery + Miles Mith
Name: Jer. Ann White, Lee Qualer, + Mites mite. Address: 800 S. Mair St. Elktor, KY42220
Telephone number: 270265-2506
Name of school children attend, if applicable: VCCHS
Group represented: Desce
Check if request was submitted to: Superintendent Board Chairperson Conferred with following administrators (names): Lee Gualet + Mike Cande
Description of Issue: Participating in a dance camp on Tune 7-10,2000 in Gattabag, TN Parents NII De traggating the stad etc
Specific Action Requested: OVE/Night + Out-Of-State / "questo
Check if you are: ☐ Board Member ☐ District Employee ☐ Community Member
All requests for items to be placed on the agenda must be submitted to the Superintendent prior to the Board meeting as specified in Board Policy 01.45. Items submitted shall require prior approval of the Superintendent.