

STUDENTS

09.36 AP.21

School-Related Student Trip Request Form & Event Specific Emergency Action Plan (EAP)

SCHOOL TCCHS FACULTY MEMBER(S) SPONSORING TRIP Project Grad

TYPE OF TRIP (CHECK ONE):

Organization requesting the Trip / Organization responsible for Payment:

DESTINATION City Forum ADDRESS 2231-T Madison St, Clarksville TN

Overnight; give name, address, phone of lodging _____

DATE(S) OF TRIP 5-16-2025 DEPARTURE TIME 10:30pm RETURN TIME 5:00am

SOURCE OF FUNDING FOR TRIP _____

NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.

NUMBER OF: STUDENTS 230 FACULTY SPONSORS 10 TOTAL # OF PARTICIPANTS _____

EAP: Person contacted at venue to discuss EAP: Carley Mosley Person making contact: Jen Harris

Is there an Automated External Defibrillator (AED) on site: Yes No If yes, where: _____

Does the venue have an Emergency Response Team: Yes No If yes, how are they contacted: _____

School Employee(s) Attending Trip (Please note beside name if employee is CPR trained):

Lee Charles
Alex Carrington
Jen Harris Harris YES (CPR)

(Please use separate sheet and attach to this form if more space is needed to list school employees attending).

Signature of Faculty Sponsor _____ Date _____
Approval of Site Based Council Representative [Signature] Date 5-9-25

District Use Only

Section 2

Approval of District Representative _____ Date _____

DRIVER: TURN THIS FORM IN WITH TIMESHEETS

Section 3

Date/Time Departure: _____ Odometer Start: _____
Date/Time Return: _____ Odometer End: _____

I hereby 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: Class of 2025

Address: _____

Telephone number: _____

Name of school children attend, if applicable: _____

Group represented: Class of 2025

Check if request was submitted to: Superintendent Board Chairperson

Conferred with following administrators (names): Lee Quarles

Description of Issue: travel

Specific Action Requested: permission to travel to City Forum in Clarksville TN for project grad

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.

Review/Revised: 3/13/06