property and the second contract of the secon	THE STATE OF THE S	dent Trip Request	A Company of the Comp	
	SUBMIT THIS FORM FOUR	(4) WEEKS PRIOR TO TAKING	G THE TRIP.	
HOOK: CHRISTIAN COUNT ARREN III VPE OF TRIP (CHECK ONE):		MEMBER(s) SPONSORING	TRIP: ANTHONY DARK	ALL, CALVE
☐ Over 300 miles	□ Under 300 miles	☐ Cocurricular	☐ Extracorricul	D.F
Classroom Field Trip	Organization/Club T	rip X Other (athletic, band	l, if applicable	
STINATION ADDRESS				
lodging;		n County Overnight:		
URPOSE/EDUCATIONAL VA		DEPARTURE TIME: TBA	RETURN TO	
OURCE OF FUNDING FOR THE MOUNT OF STUDENT FEE:				and the second
No	STUDENT SHALL BE DENIED	THE TRIP BECAUSE OF AN INAB	BLEEV TO PAY.	
BLI TRIP EXPENSES TO: []	SPONSORING ORGANIZATION	🗆 ясноот, соемси	L DROARD	□ other
LIMBER OF STUDENTS: 120	MALE STEDENT	rs: 46 Female	STUDENTS: 74	
IODE OF TRANSPORTATION	C IS DISTRICT TRANSPORTATE	ON NEEDED? ID NO YES (SEE	procedure 89,36 ap. 2	212.)
V.	****			
I CERTIFICATED COMMING	CARRIER; SPECIFY; BUS			
	CARRIER; SPECIFY; BUS BIGLE, IF ALLOWED BY POLIC	CY; SPECUY DRIVER(S)		****
☐ Private ve Certified chaperones: A	DISCLE, IF ALLOWED BY POLIC INTHONY DARNALL, CALVIN		100	*(** ******** :
CI PRIVATE VE CERTIFIED CHAPERONES: A CLASSIFIED CHAPERONES:	DICLE, IF ALLOWED BY POEK INTHONY DARNALL, CALVIN TBA	WARREN III-MORE TBA	and the the principal	Velanteman 1
ERTHED CHAPERONES: A CLASSIFED CHAPERONES: lave all chaperones un	INCLE, IF ALLOWED BY POLICE INTHONY DARNALL, CALVIN TBA dergone the required reco		nated by the principa	l'designee !
El Private ve CERTIFIED CHAPERONES: A CLASSIFIED CHAPERONES: lave all chaperones un supervise students? X Yes	HIGHE, IF ALLOWED BY POLIC INTHONY DARNALL, CALVIN TBA dergone the required reco	WARREN III-MORE TBA		
☐ PRIVATE VE CERTIFIED CHAPERONES: A CLASSIFIED CHAPERONES: Have all chaperones un supervise students? X Yes	HIGHE, IF ALLOWED BY POLIC INTHONY DARNALL, CALVIN TBA dergone the required reco	WARREN III-MORE TBA		
CERTIFIED CHAPERONES: A CLASSIFED CHAPERONES: Have all chaperones un supervise students? X Yes Have all students been no	HIGLE, IF ALLOWED BY POLICE INTRONY DARNALL, CALVIN TBA dergone the required reco i □ No stified of the rules and regul fied? Student Handbook an √/ 1 /	WARREN III-MORE TBA	behavior? X Yes □ No	
El PRIVATE VE CERTIFIED CHAPERONES: A CLASSIFIED CHAPERONES: A CLASSIFIED CHAPERONES: A Have all chaperones un supervise students? X Yes Have all students been notif Signature of Faculty Spo EMERGENCY REQUI	DISCLE, IF ALLOWED BY POLICE INTHONY DARNALL, CALVIN TBA dergone the required reco tified of the rules and regul fied? Student Handbook an \$\sum_{15} / \frac{7}{2} \text{.} \$\text{page}\$ ESTS DUE TO UNFORS	WARREN III-MORE TBA ords check and been designations regarding acceptable d Code of Conduct Permissi	behavior? X Yes \(\) No on Form \(\)	-7-25 Date
EI PRIVATE VE CLASSIFIED CHAPERONES: A CLASSIFIED CHAPERONES: A flave all chaperones un supervise students? X Yes flave all students been no flow have they been notif stignature of Faculty Spo EMERGENCY REQUI APPROVAL IMPOSSII	DISCLE, IF ALLOWED BY POLICE INTHONY DARNALL, CALVIN TBA dergone the required reco tified of the rules and regul fied? Student Handbook an \$\sum_{15} / \frac{7}{2} \text{.} \$\text{page}\$ ESTS DUE TO UNFORS	WARREN III-MORE TBA ords check and been designations regarding acceptable d Code of Conduct Permissi Signature of SEEN CIRCUMSTANCES WE THE SIGNATURE OF	behavior? X Yes \(\) No on Form \(\)	-7-25 Date
El PRIVATE VE CERTIFIED CHAPERONES: A CLASSIFIED CHAPERONES: A lave all chaperones un supervise students? X Ves Have all students been not how have they been notif Signature of Faculty Spo EMERGENCY REQUI APPROVAL IMPOSSII Trip has been approved	ANTHONY DARNALL, CALVIN TBA dergone the required reco side No stified of the rules and regul fied? Student Handbook an Solo Date ESTS DUE TO UNFORS BLE SHOULD ALSO HA	WARREN III-MORE TBA ords check and been designations regarding acceptable d Code of Conduct Permission Signature of SEEN CIRCUMSTANCES WE THE SIGNATURE OF	behavior? X Yes No on Form Mon	-7-25 Date OR BOAR IRPERSON
El PRIVATE VE CERTIFIED CHAPERONES: A CLASSIFIED CHAPERONES: A lave all chaperones un supervise students? X Ves Have all students been not how have they been notif Signature of Faculty Spo EMERGENCY REQUI APPROVAL IMPOSSII Trip has been approved	ANTHONY DARNALL, CALVIN TBA dergone the required reconstilled of the rules and regulated? Student Handbook and Student Handbook Albook	WARREN III-MORE TBA ords check and been designations regarding acceptable d Code of Conduct Permission Signature of SEEN CIRCUMSTANCES WE THE SIGNATURE OF	behavior? X Yes No on Form Mon	-7-25 Date
El PRIVATE VE CERTIFIED CHAPERONES: A CLASSIFIED CHAPERONES: A lave all chaperones un upervise students? X Ves lave all students been not loss have they been notif Signature of Faculty Spo EMERGENCY REQUI APPROVAL IMPOSSII Trip has been approved	ANTHONY DARNALL, CALVIN TBA dergone the required reco sirily No sified of the rules and regul fied? Student Handbook an S/1 (Date ESTS DUE TO UNFORS BLE SHOULD ALSO HA O disapproved, Reason for co	WARREN III-MORE TBA ords check and been designations regarding acceptable d Code of Conduct Permission Signature of SEEN CIRCUMSTANCES WE THE SIGNATURE OF	behavior? X Yes No on Form Mon	-7-25 Date OR BOAR IRPERSON

Page 1 of 1

K+8tell 5/8/25

	schoolRelated Student		
	SUBMIT THIS FORM FOUR (4) W		and the second s
SCHOOL: CHRISTIAN COUNT WARREN III TYPE OF TRIP (CHRICK ONE):	Y HIGH SCHOOL FACULTY MEM	mer(s) spossorisc trup:	ANTHONY DARNALL, CALVE
□ Over 300 miles	☐ Under 300 miles ☐	Cocurricular	□ Extracurricular □
Classroom Field Trip	□ Organization/Club Trip X	Other (athletic, band, if ap	opticable
DESTINATION ADDRESS			
lodging:	of County Within County		
	31st-Novementer 1st Depart	тука Тама: ТВА	RETURN TIME; TBA
PURPOSE/EDUCATIONAL VAU	UE2 NG ADDRESSED BY TAKENG II	us tur? (Does not	APPLY TO ATHLETIC TRIPS.
WHAT STANDARD IS DEE	All Allentaness with trackers to		
SOURCE OF PENDING FOR TRE	F; SINDENT FEE		
Amount of Student Fee:			
No s	STUDENT SHALL BE DENIED THE TRE		
BILL TRIP EXPENSES TO: [] SI	PONSORING ORGANIZATION	SCHOOL COUNCIL	□ BOARO □ OTHER
NUMBER OF STUDENTS: 120	MALE STUDENTS: 46	FEMALE STU	enes: 74
Mode of Transportation:	IS DISTRICT TRANSPORTATION NEED	DED? INO YES (SEE PROC	EDURE 09,36 AP. 212.)
☐ CERTIFICATED COMMON C	ARRIVES SPECIES: BUS		
	ARREST SELECTION OF SECURITY		
D PRIVATE VEH	CLE, IF ALLOWED BY POLICY; SPEC		
□ Private veh Certified chaperones: An	THONY DARNAUL, CALVIN WARRE		
☐ PRIVATE VEIF CERTIFIED CHAPERONES: AN	OTHON) DARNAUL, CALVIN WARRE BA	x III-More TBA	by the principal/designee to
☐ PRIVATE VEH CERTIFIED CHAPERONES: AN CLASSIFIED CHAPERONES: TI Have all chaperones under	OTHON DARNALL, CALVIN WARRE BA ergone the required records ch	x III-More TBA	by the principal/designee to
CERTIFIED CHAPERONES: AN CLASSIFIED CHAPERONES: TI Have all chaperones unde supervise students? X Yes I	OTHON) DARNALL, CALVIN WARRED BA ergone the required records ch in No	n III-More TBA	
CERTIFIED CHAPERONES: AN CLASSIFIED CHAPERONES: TI Have all chaperones unde supervise students? X Yes I Have all students been noti	THOSE DARNALL, CALVIS WARRE BA ergone the required records ch is No fied of the rules and regulations r	N III-MORE TBA seck and been designated	vior? X Yes □ No
CERTIFIED CHAPERONES: AN CLASSIFIED CHAPERONES: TI Have all chaperones unde supervise students? X Yes I Have all students been noti	OTHON) DARNALL, CALVIN WARRED BA ergone the required records ch in No	N III-MORE TBA seck and been designated	rior? X Yes □ No.
CERTIFIED CHAPERONES: AN CLASSIFIED CHAPERONES: THE Have all chaperones under supervise students? X Yes in the Have all students been notified.	orthoxy Darnall, Calvin Warre BA ergone the required records ch No fied of the rules and regulations re of? Student Handbook and Code \$\int_{1/2} \leftarrow \tau\$	NHI-MORE TBA seek and been designated regarding acceptable behave of Conduct Permission For	rior? X Yes \Box No em S-7-2S
CERTIFIED CHAPERONES: AN CLASSIFIED CHAPERONES: TI Have all chaperones unde supervise students? X Yes I Have all students been noti	orthoxy Darnall, Calvin Warre BA ergone the required records ch No fied of the rules and regulations re of? Student Handbook and Code \$\int_{1/2} \leftarrow \tau\$	N III-MORE TBA seck and been designated	rior? X Yes \Box No em S-7-2S
CERTIFIED CHAPERONES: AN CLASSIFIED CHAPERONES: THE Have all chaperones under supervise students? X Yes in the Have all students been notified the have they been notified the have all the have they been notified the have	orthoxy Darnall, Calvin Warre BA ergone the required records ch No fied of the rules and regulations re of? Student Handbook and Code \$\int_{1/2} \leftarrow \tau\$	regarding acceptable behave of Conduct Permission For Signature of Prince	rior? X Yes 🗆 No 5 - 7 - 2 S ipal Date AT MAKE PRIOR BOARI
CERTIFIED CHAPERONES: AN CLASSIFIED CHAPERONES: THe Have all chaperones unde supervise students? X yes in the call students been notified by the have they been notified by the control of Faculty Sponsor EMERGENCY REQUES APPROVAL IMPOSSIBILITY.	BA ergone the required records ch O No fied of the rules and regulations r of? Student Handbook and Code Sor Date	regarding acceptable behave of Conduct Permission For Signature of Principle CIRCUMSTANCES THE	rior? X Yes 🗆 No 5 - 7 - 2 S ipal Date AT MAKE PRIOR BOARI
CERTIFIED CHAPERONES: AN CLASSIFIED CHAPERONES: THe Have all chaperones unde supervise students? X Yes in the Have all students been notified the have they been notified by the have they been notified they have they been they have they have they been they have the have they have the have the have they have they have they have the have the have the have t	THOSE DARMALL, CALVIN WARRED BA ergone the required records ch No fled of the rules and regulations re od? Student Handbook and Code Sorr STS DUE TO UNFORSEEN CLE SHOULD ALSO HAVE TH	regarding acceptable behave of Conduct Permission For Signature of Principle CIRCUMSTANCES THE	rior? X Yes □ No em 5 - 7 - 25 ipal Date AT MAKE PRIOR BOARI E BOARD CHAIRPERSON
CERTIFIED CHAPERONES: AN CLASSIFIED CHAPERONES: THe Have all chaperones unde supervise students? X Yes in the Have all students been notified the have they been notified by the have they been notified they have they been they have they have they been they have the have they have the have the have they have they have they have the have the have the have t	THOSE DARMALL, CALVIN WARRED BA ergone the required records ch No fled of the rules and regulations re od? Student Handbook and Code Sorr STS DUE TO UNFORSEEN CLE SHOULD ALSO HAVE TH	regarding acceptable behave of Conduct Permission For Signature of Principle CIRCUMSTANCES THE	rior? X Yes 🗆 No 5 - 7 - 2 S ipal Date AT MAKE PRIOR BOARI
CERTIFIED CHAPERONES: AN CLASSIFIED CHAPERONES: THe Have all chaperones unde supervise students? X Yes in the Have all students been notified the have they been notified by the have they been notified they have they been they have they have they been they have the have they have the have the have they have they have they have the have the have the have t	THOSE DARMALL, CALVIS WARRED BA ergone the required records ch O No fied of the rules and regulations re of? Student Handbook and Code Sor Date STS DUE TO UNFORSEEN CLE SHOULD ALSO HAVE TH	regarding acceptable behave of Conduct Permission For Signature of Principle CIRCUMSTANCES THE	rior? X Yes □ No em 5 - 7 - 25 ipal Date AT MAKE PRIOR BOARI E BOARD CHAIRPERSON

Related Procedures 09.36 AP.211, 09.36 AP.212, 09.36 AP.23

Page 1 of 1

hr A 500 5/1/25

SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO TAKING THE TRIP.
SCHOOL * Christian Co. High Faculty Member(s) sponsoring trip Samoutival Chuz
TYPE OF TRIP (CHECK ALL THAT APPLY):
Over 300 miles Under 300 miles Co curricular Extracurricular
Classroom Field Trip Organization/Club Trip Other (athletic, band, if applicable)
DESTINATION ADDRESS 12481 HOUTDOY PHONE-DESTINATION 7145309453
Out of State Out of County Within County Overnight: give name, address, phone of lodging
DATE(S) OF TRIP JUNE 28th
DATE(S) OF TRIP JUNE 28th START END (SELECT AM OR PM FROM DROPDOWN) (SELECT AM OR PM FROM DROPDOWN) (SELECT AM OR PM FROM DROPDOWN)
PURPOSE/EDUCATIONAL VALUE FBLA NOTIONAL CONFERENCE
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)
multiple AH, AF, EA, EB, EC
SOURCE OF FUNDING FOR TRIP LOVEC
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.
BILL TRIP EXPENSES TO: Sponsoring organization School council Board Other
NUMBER OF: STUDENTS MALE STUDENTS FEMALE STUDENTS
MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? NO YES (SEE PROCEDURE 09.36 AP. 212.)
Dertificated common carrier; specify ? possibly school vour to transport students Private vehicle, if allowed by policy; specify driver(s) to Air Poyt
PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) TO POYT TO
Certified chaperones Samantha Cruz Samantha Cruz
Classified chaperones Marvin Harriess Samantha Cruz Marvin Harriess Marvin Harriess
Have all chaperones undergone the required records check and been designated by the principal/designee to supervise students?
Have all students been notified of the rules and regulations regarding acceptable behavior? Yes \sum No
How have they been notified? <u>Verbol</u> & Dermission Forms going out
· · · · · · · · · · · · · · · · · · ·
X S. Cu X Dly Miles
Faculty/Sponsor Signature Principal Signature
Trip has been 🗌 approved 🔲 disapproved. Reason for disapproval
For overnight and/or out-of-state trips, approval of the Superintendent and/or Board may be required by policy 09.36.

la & Stell 3/1/25 Chrifely 51-200

School-Related Student Trip Request Form
SUBMIT THIS FORM FOUR (4) WEEKS PRIOR TO TAKING THE TRIP.
FACULTY MEMBER(S) SPONSORING TRIP KIKI ROCHOTO TYPE OF TRIP (CHECK ONE):
☐ Over 300 miles ☐ Under 300 miles ☐ Cocurricular ☐ Extracurricular ☐ Classroom Field Trip ☐ Organization/Club Trip ☐ Other (athletic, band, if applicable
DESTINATION BOTHER University Address 325 (herry Ave PHONE 731-352-400)
Out of State Out of County Within County Overnight: give name, address, phone of lodging Bethel University Student Dorms 325 Cherry Ave, McKenzie, TN 38201
DATE(S) OF TRIP JUNE 8-11, 2025 DEPARTURE TIME 3:0000 RETURN TIME 10:0000
PURPOSE/EDUCATIONAL VALUE Athletic Team Basketball Camp
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)
Source of funding for trip CCHS G: (15 Basketball
AMOUNT OF STUDENT FEE: 4690 (TOtal F&C)
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.
BILL TRIP EXPENSES TO: SPONSORING ORGANIZATION SCHOOL COUNCIL BOARD TOTHER
Number of: students 12 Male Students 0 Female Students 12
MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? ☐ NO ☐ YES (SEE PROCEDURE 09.36 AP. 212.)☐ CERTIFICATED COMMON CARRIER; SPECIFY
PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)
CLASSIFIED CHAPERONES Frica Gordian, Jamesta Griger, Manette Stiger
Have all chaperones undergone the required records check and been designated by the principal/designee to supervise students? Yes \(\Bar{\text{No}} \) No Have all students been notified of the rules and regulations regarding acceptable behavior? Yes \(\Bar{\text{No}} \) No How have they been notified? Staped design of Team Rules & Expectant
KK Kacy Store 4/18/35 Signature of Faculty Sponsor Date Signature of Principal Date
EMERGENCY REQUESTS DUE TO UNFORSEEN CIRCUMSTANCES THAT MAKE PRIOR BOARD APPROVAL IMPOSSIBLE SHOULD ALSO HAVE THE SIGNATURE OF THE BOARD CHAIRPERSON
Trip has been □ approved □ disapproved. Reason for disapproval
Maniforte 4-0-2026
Signature of Superintendent/Designee Date
Signature of Board Chair Date For examinist and/or part of state tring approval of the Superintendent and/or Board may be required by policy 09.36

Related Procedures:

09.36 AP.211, 09.36 AP.212, 09.36 AP.23

Review/Revised:11/21/13

Page 1 of 1

LASBELL 4/20/25

		SUBMIT THIS FORM FOUR (4) WEEKS PRIOR TO TAKING T	HE TRIP.
School: Christi	IAN COUNTY	HIGH SCHOOL FACULTY MI	EMBER(S) SPONSORING TRIP:	M. WYATT
Type of Trip (ch	ECK ONE):			
X Over 300 mil ☐ Classroom Fi		☐ Under 300 miles X Organization/Club Trip	☐ Cocurricular☐ Other (athletic, band, if	X Extracurricular applicable
DESTINATION: On	ANI SHOREH	AM HOTEL WASHINGTON		
Address: 2500 C	ALVERT STR	EET NW WASHINGTON, DC	20008	
PHONE: 202-234-	<u>0700</u>			
X Out of	f State X	Out of County Within C	ounty	
X Overnight: g	ive name, p	hone number, and address of	f lodging	
DATE(S) OF TRIP:	6/02/2025-	06/08/2025		
DEPARTURE TIME:	: 8:30 A.M.	on 06/02/2025 Return Tim	TE: 3:00 P.M. ON 06/08/202	<u>5</u>
Purpose/Educati historical tours		ie: Students will be able 1	TO ATTEND LEADERSHIP WORK	CSHOPS, COMMUNITY SERVICE, AND
WHAT STANDARD	IS BEING ADI	DRESSED BY TAKING THIS TRIP	(Does not apply to athle	ETIC TRIPS.)
SS-AA007 DEMO	ONSTRATE U	NDERSTANDING OF BASIC INTEL	RPERSONAL COMMUNICATION	(LISTENING, WRITTEN, ORAL, ETC
Source of funding	NG FOR TRIP	: PERKINS, LAVEC, DAF		
AMOUNT OF S	TUDENT F	EE: <u>\$0</u>		
	No sa	FUDENT SHALL BE DENIED THE	TRIP BECAUSE OF AN INABILIT	гу то рау.
BILL TRIP EXPENS	ES TO: X SP	ONSORING ORGANIZATION	□ SCHOOL COUNCIL	□ BOARD □ OTHER
Number of: stud	DENTS 1	MALE STUDENTS: 0	Female St	TUDENTS 1
		s district transportation rrier; specify <u>Schoo</u>		EE PROCEDURE 09.36 AP. 212.)
		D BY POLICY; SPECIFY DRIVER		
CERTIFIED CHAPE				
CLASSIFIED CHAP	ERONES			
Have all chaper supervise student		rgone the required records	check and been designat	ted by the principal/designee t X Yes □ No
Have all students	been notifi	ed of the rules and regulatio	ns regarding acceptable bel	navior? X Yes □ No
Signature of Fac	Culty Spons		Noted & B Signature of Prin	ncipal Date
EMERGENCY APPROVAL IN	REQUES IPOSSIBL	rs due to unforesei e should also have	EN CIRCUMSTANCES T THE SIGNATURE OF T	THAT MAKE PRIOR BOAR HE BOARD CHAIRPERSON
Trip has been pap	proved [disapproved. Reason for disap	proval	
	1/	martin	1	4-14-2524
Signatu	re of Superin	ntendent/Designee		Date
	re of Board (Date
For overnight	ht and/or out	of-state trips, approval of the S	uperintendent and/or Board ma	ay be required by policy 09.36.
RELATED PRO	CEDURES:			
09.36 AP.211	, 09.36 A	P.212, 09.36 AP.2	Re	eview/Revised:11/21/13
	1	1 Sta 0	1.11-	

Page 1 of 1

SUBMIT THIS FORM FOUR (4) WEEKS PRIO	OR TO TAKING THE TRIP.
SCHOOL CCMS FACULTY MEMBER(S) SPO	ONSORING TRIP Demarcus Wilfor
TYPE OF TRIP (CHECK ONE):	
☐ Over 300 miles ☐ Under 300 miles ☐ Cocurricu ☐ Classroom Field Trip ☐ Organization/Club Trip ☐ Other (ath	letic, band, if applicable
DESTINATION <u>Bethel</u> <u>University</u> Address <u>325 Cherity</u> Out of State □ Out of County □ Within County □	TN 38001 Overnight give name address phone of
lodging Rethel University	
DATE(S) OF TRIP June 5 - 7th DEPARTURE TIME 7	BD RETURN TIME 78D
Purpose/Educational Value	
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP?	(DOES NOT APPLY TO ATHLETIC TRIPS.)
Source of Funding For Trip Boys Busket bak Amount of Student Fee: 15.00 per	
AMOUNT OF STUDENT FEE: 15.00 per	<u> </u>
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE	OF AN INABILITY TO PAY.
BILL TRIP EXPENSES TO: ☐ SPONSORING ORGANIZATION ☐ SCHO	OL COUNCIL DOARD DOTHER
Number of: students Male Students//	FEMALE STUDENTS
Mode of Transportation: is district transportation needed ap. 212.) Certificated common carrier; specify	
☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY D CERTIFIED CHAPERONES	
CLASSIFIED CHAPERONES	
acceptable behavior? \(\subseteq \text{Yes} \subseteq \text{No} \) How have they been notification.	otified of the rules and regulations regarding
Signature of Faculty Sponsor Date Sign	721.20
Signature of Paculty Sponsor Date Sign	nature of Principal Date
EMERGENCY REQUESTS DUE TO UNFORSEEN CIRCUMS APPROVAL IMPOSSIBLE SHOULD ALSO HAVE THE SIGNA	TANCES THAT MAKE PRIOR BOARD TURE OF THE BOARD CHAIRPERSON
Trip has been approved disapproved. Reason for disapproval	
Mrs Tangel	.8-2-228
Signature of Superintendent/Designee	Date
Signature of Board Chair	Date
For overnight and/or out-of-state trips, approval of the Superintendent and	d/or Board may be required by policy 09.36.
D 1 4 1 D 1	17 P3 W P1

Related Procedures:

09.36 AP.211, 09.36 AP.212, 09.36 AP.23

Review/Revised:11/21/13

Page 1 of 1

£L SO	
	FACULTY MEMBER(S) SPONSORING TRIP Tracky Lagel
TYPE OF TRIP (CHECK ONE):	15 WK
100	Under 300 miles ☐ Cocurricular ☐ Extracurricular
DESTINATION CHUCK E	Organization/Club Trip Other (athletic, band, if applicable PHONE PHONE
	ounty ☐ Within County ☐ Overnight: give name, address, phone of lodging
	within County is overnight. give name, address, phone of loaging
DATE(S) OF TRIP	DEPARTURE TIME 10 714 A M RETURN TIME 2:86
PURPOSE/EDUCATIONAL VAL	WE REMARD FOR Tasting out of El Program
WHAT STANDARD IS BEING AI	DDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)
SOURCE OF FUNDING FOR TRI	P 15 WK
AMOUNT OF STUDENT FEE: _	\$ 11.99
No stude	NT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.
BILL TRIP EXPENSES TO: SI	PONSORING ORGANIZATION \square SCHOOL COUNCIL \square BOARD \square OTHER
Number of: students	MALE STUDENTS FEMALE STUDENTS
MODE OF TRANSPORTATION:	: IS DISTRICT TRANSPORTATION NEEDED? NO YES (SEE PROCEDURE 09.36 AP.
	MON CARRIER; SPECIFY
ALANJE CENTILICATED COMIN	
☐ PRIVATE VEHICLI	E, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)
☐ PRIVATE VEHICLI	E, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)
☐ PRIVATE VEHICLI	E, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)
☐ PRIVATE VEHICLI CERTIFIED CHAPERONES	E, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)
☐ PRIVATE VEHICLI CERTIFIED CHAPERONES CLASSIFIED CHAPERONES Have all chaperones undergor	E, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)
☐ PRIVATE VEHICLI CERTIFIED CHAPERONES CLASSIFIED CHAPERONES Have all chaperones undergor supervise	e, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)
☐ PRIVATE VEHICLI CERTIFIED CHAPERONES CLASSIFIED CHAPERONES Have all chaperones undergor	e, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)
☐ PRIVATE VEHICLI CERTIFIED CHAPERONES CLASSIFIED CHAPERONES Have all chaperones undergor supervise students? ☐ Yes ☐ No	e, IF ALLOWED BY POLICY; SPECIFY DRIVER(S)
☐ PRIVATE VEHICLI CERTIFIED CHAPERONES CLASSIFIED CHAPERONES Have all chaperones undergor supervise students? ☐ Yes ☐ No acceptable behavior? ☐ Yes ☐	e, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) The the required records check and been designated by the principal/designee to Have all students been notified of the rules and regulations regard How have they been notified?
☐ PRIVATE VEHICLI CERTIFIED CHAPERONES CLASSIFIED CHAPERONES Have all chaperones undergor supervise students? ☐ Yes ☐ No acceptable behavior? ☐ Yes ☐ Signature of Faculty Sponsor	ethe required records check and been designated by the principal/designee to Have all students been notified of the rules and regulations regard How have they been notified? Date Signature of Principal Date
☐ PRIVATE VEHICLI CERTIFIED CHAPERONES CLASSIFIED CHAPERONES Have all chaperones undergor supervise students? ☐ Yes ☐ No acceptable behavior? ☐ Yes ☐ Signature of Faculty Sponsor EMERGENCY REQUESTS	Have all students been notified of the rules and regulations regard How have they been notified? Date Signature of Principal Date
□ PRIVATE VEHICLE CERTIFIED CHAPERONES CLASSIFIED CHAPERONES Have all chaperones undergor supervise students? □ Yes □ No acceptable behavior? □ Yes □ Signature of Faculty Sponsor EMERGENCY REQUESTS APPROVAL IMPOSSIBLE	Have all students been notified of the rules and regulations regard How have they been notified? Date Signature of Principal Date SHOULD ALSO HAVE THE SIGNATURE OF THE BOARD CHAIRPERSO
□ PRIVATE VEHICLE CERTIFIED CHAPERONES CLASSIFIED CHAPERONES Have all chaperones undergor supervise students? □ Yes □ No acceptable behavior? □ Yes □ Signature of Faculty Sponsor EMERGENCY REQUESTS APPROVAL IMPOSSIBLE	Have all students been notified of the rules and regulations regard How have they been notified? Date Signature of Principal Date
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School-Related Student Trip Request Form
SCOULT THIS FORM FOUR (4) WEEKS PRIOR TO TAKING THE TOPS
Type of Trip (CHECK ONE): FACTLTY MEMBER(S) SPONSORING TRIP I racy Blan
□ Cover 300 miles □ Classroom Field Trip □ Organization Club Trip □ Organization Club Trip □ Other (athletic, band, if applicable
lodeine Overnight give name
PURPOSE/EDICATIONAL VALUE CONCRAT
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO APPLETIC TRIPS.)
SOURCE OF FUNDING FOR TRIP
AMOUNT OF STUDENT FEE:
NO STUDENT SHALL BE DEMED THE TRIP BECAUSE OF AN INABILITY TO PAY. BILL TRIP EXPENSES TO: SPONSORING ORGANIZATION SCHOOL COUNCIL BOARD OTHER NUMBER OF: STUDENTS STUDENTS FEMALE STUDENTS FEMALE STUDENTS
AP. 212.) CERTIFICATED COMMON CARRIER; SPECIFY PRIVATE VEHICLE OF ALLOWED BY POLICY; SPECIFY DRIVER(S) CERTIFIED CHAPERONES Vacy Raco
CLASSIFIED CHAPERONES
Have all chaperones undergone the required records check and been degranated by the principal designee to supervise acceptable behavior? Des Do Have all students been notified of the the and regulations regarding flow have they been notified? Signature of Faculty Sponsor EMERGENCY REQUESTS DUE TO UNFORSEEN CIRCUMSTANCES THAT MAKE PRIOR BOARD APPROVAL IMPOSSIBLE SHOULD ALSO HAVE THE SIGNATURE OF THE BOARD CHAIRPERSON
Signature of Superintendent Designed
Signature of Board Chair
For overnight and or out-of-state trips, approval of the Superintendent and or Board may be required by policy 09.36.
Control Procedures:

School-Related Student Trip Requ	iest Form
SUBMIT THIS FORM FOUR (4) WEEKS PRIOR TO	TAKING THE TRIP.
	RINGTRIP Lean Thomas
TYPE OF TRIP (CHECK ONE): □ Over 300 miles □ Cocurricular	m.
☐ Classroom Field Trip ☐ Organization/Club Trip ☐ Other (athletic,	☐ Extracurricular band, if applicable
DESTINATION Christian Co ADDRESS Various Fa	
☐ Out of State ☐ Out of County ☑ Within County ☐ Overr	night: give name, address, phone of
DATE(S) OF TRIP $\frac{4/29/25}{25}$ DEPARTURE TIME $9:00$	AM RETURN TIME 3:00 PM
PURPOSE/EDUCATIONAL VALUE Deliver meals to Ch	ristian Co. Farmers . "Thank
WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOI	ES NOT APPLY TO ATHLETIC TRIPS.) Farm
SOURCE OF FUNDING FOR TRIP N/A	
AMOUNT OF STUDENT FEE: 50	
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF A	N INABILITY TO PAY,
BILL TRIP EXPENSES TO: SPONSORING ORGANIZATION SCHOOL CO	OUNCIL DBOARD DOTHER
NUMBER OF: STUDENTS 7 MALE STUDENTS TBD FE	MALE STUDENTS TBD
MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? AP. 212.) CERTIFICATED COMMON CARRIER; SPECIFY	NO TYES (SEE PROCEDURE 09.36 VA
☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVE	R(S)
CERTIFIED CHAPERONES Leah Thomas	
CLASSIFIED CHAPERONES N	
Hear Thomas 4/11/25 / May	ted by the principal/designee to supervise d of the rules and regulations regarding COCE, of Acceptible Beh For principal Date
EMERGENCY REQUESTS DUE TO UNFORSEEN CIRCUMSTAN APPROVAL IMPOSSIBLE SHOULD ALSO HAVE THE SIGNATUR	CES THAT MAKE PRIOR BOARD E OF THE BOARD CHAIRPERSON
Trip has been 🗷 approved 🔲 disapproved. Reason for disapproval	
Phi in D	b ii iae
Signature of Superintendent/Designee	Date
Term Bell "Kine"	4-11-25
Signature of Board Chair For overnight and or out-of-state trips, approval of the Superintendent and or l	Date Board may be required by policy 09.36.
Related Procedures:	
09.36 AP.211, 09.36 AP.212, 09.36 AP.23	
07.50 III 1211, 07.50 III 1212, 07.50 III 125	Review/Revised:11/21/13

Page 1 of 1

School-Related Student Trip Request Form
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Domain State 2 Description Country & Overnight the name, address, phone of
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SOURCE OF FUNDING FOR TRIP Supplemental UTE
AMOUNT OF STUDENT FEE:

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acceptable behavion 母 Mable behavior Byes a No

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Principal

APPROVAL IMPOSSIBLE SHOULD ALSO HAVE THE SIGNATURE OF THE BOARD CHAIRPERSON ENTERGENCY REQUESTS DUE TO UNFORSEEN CIRCUNSTANCES THAT MAKE PRIOR BOARD

Trip has been Dupproved.

disapproved. Reason for disapproval.

Signature of Superintendent De

Signature of Board Chair

4-14-2025

Date

For overnight and or out-of-state trips, approval of the Superintendent and or Board may be required by policy 09.36.

Related Procedures:

09.36 AP.211. 09.36 AP.212. 09.36 AP.23

17 x xxxx 4/14/25

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SCHOOL TYPE OF TRIP	SUBMIT THIS FORM FOUR (4) WEEKS PRIOR	TO TAKING THE TRIP	
☐ Over 300 miles ☐ Classroom Field Trip DESTINATION PAC	☐ Under 300 miles ☐ Organization/Club Trip ADDRESS	☐ Cocurricula ☐ Other (athle	tic, band, if applicab	racurricular le
				me, address, phone of
lodging N/A DATE(S) OF TRIP 4/2/17	DEPARTURE TIME	830a	RETURN TIME \Z.	HE .
PURPOSE/EDUCATIONAL VA		Cheral ("L'OCCION	HOP P
WHAT STANDARD IS BED	NG ADDRESSED BY TAKING	THIS TRIP? (DOES NOT APPLY	TO ATHLETIC TRIPS.)
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AMOUNT OF STUDENT FEE:	NA			
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212.) LI CERTIFICATED	COMMON CARRIER; SPECIFY.			
CERTIFIED CHAPERONES	HICLE, IF ALLOWED BY POLICE	CY; SPECIFY DRIV	/ER(S)	
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CLASSIFIED CHAPERONES		- A1 100 100		
acceptable behavior? Ve Adu Van Signature of Faculty Spons EMERGENCY REQUEST APPROVAL IMPOSSIBLE	4-10-25	CIRCUMSTA	rure of Principal NCES THAT MA	LISCUSSION White Prior Board CHAIRPERSON
Trip has been approved	☐ disapproved. Reason for disapp	proval		
11	· Janel		11 11	10-
Signature of Superin	ntendent/Designae		9-16	Date
Tombell	" Krkme"		#1 \$ 7.7 7.5	No-25
Signature of Board	Chair		1	Date
For overnight and/or out	-of-state trips, approval of the Su	perintendent and/o	or Board may be require	the by policy 09.36.
RELATED PROCEDURES:				
09.36 AP.211, 09.3	36 AP.212, 09.36 AP.23			
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	Vehicle Re	equest Forn	1	
School	Faculty Member(s) sponsoring tri	P	
Zorden And				F-MAILED 4/16/25 KEdward
				K Edward

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STUDENTS

09.36 AP.21

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Over 300 miles	Perse
Over 300 miles	
Out of State Out of County	885-
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POSE/EDUCATIONAL VALUE To tegen student how to	show
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UNT OF STUDENT FEE:	
NO STUDENT SHALL BE DENIED THE TRIP BECAUSE OF AN INABILITY TO PAY.	
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BER OF: STUDENTS 5 MALE STUDENTS 3 FEMALE STUDENTS 2	
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PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) LIFIED CHAPERONES TOMES De (Se)	
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Signature of Superintendent Besignee Date	~-
Signature of Board Chair Date For overnight and or out-of-state trips, approval of the Superintendent and or Board may be required by policy 09	25

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