

School Field Trip Packet - Overnight Greater than 100 miles with District Transportation

Organization: **Marion County Public Schools**Employee: **KARA CLARK**Assigned To: **User - kim.hood**[Show History](#)

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

School Professional Leave

03.125 AP.21

* Employee Name	Kara Clark
* School/Work site	Lebanon Middle School
* Date(s) of leave	10/16/25 & 10/17/25
* Time of departure	08:30 am
* Destination Name & Address	Knically Conference Center at Western Kentucky University- Bowling Green, KY 2355 Nashville Rd, Bowling Green, KY 42101
* Purpose/Rationale for attending	Regional Summit for Jr. Beta
* Number of students involved	105

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

Number of days (Avg. \$100 a day) 2

Substitute code Jr. Beta

* 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 200

***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 Kara Clark

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

* Destination name Knicely Conference Center

* Destination address 2355 Nashville Rd, Bowling Green, KY 42101

* Destination phone (270) 745-1908

Lodging name

Lodging address

Lodging phone

* Date(s) of trip 10/16/25-10/17/25

* Time of departure 08:30 am

* Purpose/Educational value
Jr. Beta Regional Leadership Summit Convention

* Source of funding for trip Beta fundraisers - Students pay

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

* Bill trip expenses to (i.e. Sponsoring organization, school council, Board) Sponsoring Organization (LMS Jr Beta Club)

* Number of students 22

* Number of faculty sponsors 2

* Other chaperones 0

* Total number of participants 24

* Supervision (Attach list of names of students and chaperones)

Summit List.pdf

Added 9/2/2025 3:03:00 PM

[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

School Bus/SUV Request

This authorization for the use of this vehicle is valid for the use of said vehicle as a "School Bus/SUV" and for no other purpose.

* Buses/SUV needed (please list below if need bus or SUV)

1

* Destination Name & Address Knicely Conference Center 2355 Nashville Rd,
Bowling Green, KY 42101

* Date(s) of trip 10/16/25-10/17/25

* Group requesting bus/SUV LMS Jr. Beta Club

* Purpose of trip Jr Beta Regional Leadership Summit

* Bus/SUV pick-up time 08:30 am

* Bus/SUV return time 03:00 pm

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

* Account to be charged Lebanon Middle School Jr. Beta Club

[Blank Student List Template](#)

* Faculty supervision will be provided for this trip. At least one member of our faculty will ride in each bus/SUV. A copy of the list of pupils that are assigned to ride this particular school bus/SUV can be uploaded below. The driver will be given a copy and the school should also keep a copy of all riders on file.

Summit List.pdf

Added 9/2/2025 3:05:00 PM

[view](#)

* Employee Signature

Signed: **Kara Clark**

Stamped: Tue Sep 02 2025 16:05:21 GMT-0400 (Eastern Daylight Time); 9/2/2025 3:05:22 PM; 2025-09-02 20:05:22Z; 170.185.150.217; Employee - #627 - KARA CLARK

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: **Sara Brady**

Stamped: Wed Sep 10 2025 08:35:53 GMT-0400 (Eastern Daylight Time); 9/10/2025 7:35:53 AM; 2025-09-10 12:35:53Z; 170.185.150.173; Employee - #29 - SARA BRADY

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

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*** Field Trip Designee Signature**

Not Signed

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*** Date of Board approval***** Superintendent Signature**

Not Signed

Read-Only

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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****Deny**