STUDENTS

BEECHWOOD INDEPENDENT SCHOOLS TRANSPORTAION/FIELD TRIP REQUEST FORM

09.36 AP.21

	stin Bralley Departure Time ~9:00am (estimate) Return Time ~11:00pm (estimate)
faculty/staff member(s) sponsoring this trip	s checked on the School-Related Trip Permission Slip and Medical Release Form (09.36 AP.2) to are responsible to ensure buses/mode of transportation comply with procedure related to f
TYPE OF TRIP (CHECK ONE):	
☐ Classroom Field Trip, Specify Cl	lass:
	Specify
☐ Organization/Club Trip, Specify	
☐ Other (athletic, band, if applicab	ble), Specify Band
	High School Miles (one way) to destination: 140
City/State Elizabethtown	
☐ Overnight: Give name of lodging	g and address
TRANSPORTATION	
1 Number of Buses needed (1 o	driver per bus unless otherwise indicated) or \square Suburban \square Van See 09.36
**Does trip exceed 100 miles?	☑ Yes ☐ No If Yes, trip requires Board of Education approval.
THIS SECTION COMPLETED BY TRA	ANSPORTATION DEPARTMENT
Bus Available □Yes □No	Suburban Available □Yes □No Van Available □Yes □No
Bus # ha	as been reserved.
Transportation Supervisor _	Signature Date
☐ Use of Common Carrier in Lieu o	of School Bus Procedure 09.36
E ofe or common carrier in Elea o	(Complete Use of Common Carrier form, requires Board of Education appro
	icy. Specify Driver(s)
\square Private Vehicle, if allowed by poli	
<u> </u>	
Purpose/Educational Value KMEA	All-State Band 2nd Round Auditions
Purpose/Educational Value KMEA Number of days absent from school 0	All-State Band 2nd Round Auditions Number of: Students Going on Trip ~20 Faculty/Staff_2
Purpose/Educational Value $\frac{KMEA}{0}$ Number of days absent from school $\frac{0}{0}$ Other Chaperones $\frac{0}{0}$	All-State Band 2nd Round Auditions Number of: Students Going on Trip ~20 Faculty/Staff 2 ARE ALL CHAPERONES ON THE VOLUNTEER LIST? □ YES □
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