

**School-Related Student Trip Request Form**

SUBMIT THIS FORM TWO (2) WEEKS PRIOR TO TAKING THE TRIP.

SCHOOL Christian Co. HighFACULTY MEMBER(S) SPONSORING TRIP Robert A. Burnham**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 Frankfort, KentuckyADDRESS 405 Mero Street, Frankfort, KY 40601-1921PHONE-DESTINATION 502-564-5335

- ☐ Out of State    ☒ Out of County    ☐ Within County    ☒ Overnight: give name, address, phone of lodging

**BEST WESTERN PARKSIDE INN 80 CHENAULT ROAD****FRANKFORT, KENTUCKY 40601-9260 PHONE #:502-695-6111**DATE(S) OF TRIP 2/18/2009-2/22/2009DEPARTURE TIME 12:30PMRETURN TIME 12:30 PM

START

END

(SELECT AM OR PM FROM DROPDOWN)

(SELECT AM OR PM FROM DROPDOWN)

PURPOSE/EDUCATIONAL VALUE Competition

WHAT STANDARD IS BEING ADDRESSED BY TAKING THIS TRIP? (DOES NOT APPLY TO ATHLETIC TRIPS.)

SOURCE OF FUNDING FOR TRIP lkjdkdjs

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 18MALE STUDENTS 14FEMALE STUDENTS 4MODE OF TRANSPORTATION: IS DISTRICT TRANSPORTATION NEEDED? ☐ NO ☒ YES (SEE PROCEDURE 09.36 AP. 212.)☒ CERTIFICATED COMMON CARRIER; SPECIFY School Buss☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) \_\_\_\_\_Certified chaperones ROBERT A. BURNHAMClassified chaperones ANTHONY SMITH, DAMIEN LEAVELL, KRIS PERRY, & ANTHONY HARRIS

Have all chaperones undergone the required records check and been designated by the principal/designee to supervise students?

☒ Yes ☐ No

Have all students been notified of the rules and regulations regarding acceptable behavior?

☒ Yes ☐ NoHow have they been notified? Code of Conduct signed by athletes and parents

Invalid signature

X

Robert A. Burnham

X

Faculty/Sponsor Signature

Principal Signature

Trip has been ☐ approved ☐ disapproved. Reason for disapproval \_\_\_\_\_

X

Signature of Superintendent/Designee

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