

**OLDHAM COUNTY BOARD OF EDUCATION
ADMINISTRATIVE REGULATION**

FIELD TRIP BUS REQUEST FORM

8005.01F

Related to: Policy 8003, 4055, 8005AR; 8005.001F

OVERNIGHT

EXTENDED DAY

(Same day but extends beyond the school day)

DAY TRIP ONLY

School: **North Oldham High School**

Employee(s) In Charge: **Brian Crumbo/Jeffrey Surran** Group: **Girls/Boys Track**

Destination: **Nashville, TN**

Date(s) of Trip: **March 20-21, 2026** Time of Departure: **8:00 am** Time of Return: **6:00pm**

Approximate Mileage (one way): **210** *

Approximate Number of Students: **80**

Number of Chaperones/Adults: **8**

TOTAL TRANSPORTED: **88** *

Number of Buses: **0**

*{44 Person Maximum for MS/HS} {60 Person Maximum for ELEM}

*These numbers include both students and all adults (bus driver, teachers, coaches, chaperones, etc.)

Method of Transportation (if not by school bus): **Transportation by common carrier**

Common Carriers must be Board approved and should have the 8005.02F accompanying this form

*All tolls are the responsibility of the school or group requesting the trip.

Trip Required or Optional: **optional**

If optional, indicate student charges:

Transportation (mileage, driver)	\$	\$ 200.00
Admissions	\$	\$ 0.00
Other	\$	\$ 0.00
Total Charges	\$	\$ 200.00

Number of Instructional Days Lost: **1**

Justification: Why is the trip necessary? What is to be learned? How will the experience be used and evaluated?

Team building trip with out-of-area quality competition.



Requested by: **Brian Crumbo** Date: **01/15/2026**

APPROVAL/DISAPPROVAL

Approved/Disapproved: *[Signature]*, Principal Date: **1/16/26**

Approved/Disapproved: *[Signature]*, Level Director Date: **1/16/26**

Approved/Disapproved: *[Signature]*, Superintendent Date: _____

*Field trips in excess of a 60-mile radius of the Board office require the approval of the Superintendent.

*ALL Overnight Field Trips and trips using Common Carriers must be approved by the school board and Superintendent.

Upon approval, the school will receive an approved form from the Superintendent. *

Adopted

Oldham County Board of Education

September 2, 1980

Revised: February 1, 1985, September 1991, April 29, 1996, June 19, 1998, June 9, 1999, November 23, 1999, April 2, 2001, March 25, 2004, March 22, 2005, July 27, 2005, August 10, 2006, June 28, 2007, March 11, 2008, July 16, 2008, February 4, 2014, July 17, 2015, January 6, 2017, January 18, 2019

School-Related Student Trip Request Form OVERNIGHT EXTENDED DAY DAY TRIP ONLY *(Same day but extends beyond the school day)*School North Oldham High SchoolEmployee(s) in Charge: Tyler Smith Group: ChoirDestination: Cannon Center for the Performing Arts, 255 N Main St, Memphis, TN 38103Date(s) of Trip: 3/4/26-3/7/26 Time of Departure: 8:00 AM 3/4 Time of Return: 9pm 3/7Approximate Mileage (one way): 406Approximate Number of Students: 1Number of Chaperones/Adults: 2TOTAL TRANSPORTED: 0

*{44 Person Maximum for HS/HS}{60 Person Maximum for ELEM}

*These numbers include both students and all adults (bus driver, teachers, coaches, chaperones, etc.)

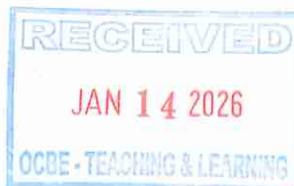
Method of Transportation (if not by school bus): Parent Transported

Common Carriers must be Board approved and should have the accompanying 09.36 AP.2 with this form

*All tolls are the responsibility of the school or group requesting the trip

Trip Required or Optional: Optional

If optional, indicate student charges:

Transportation (mileage, driver) \$0Admissions \$0Other \$0Total Charges \$0.00Number of Instructional Days Lost: 3Justification: Why is the trip necessary? What is to be learned? How will the experience be used and evaluated? This student has gained entrance into the Southern ACDA 7-9th Grade SATB Honor Choir, an extremelycompetitive and rigorous group that is comprised of around 150 members from across 11 states/selected from a pool of hundreds of candidates.Here, they will represent our school with pride and have an opportunity unlike any singing chances they could have here in the state of Kentucky.Requested by: Tyler SmithDate: 12/03/2025APPROVAL/DISAPPROVALApproved/Disapproved: 1/14/26, Principal Date: 1/14/26Approved/Disapproved: 1/15/26, Level Director Date: 1/15/26Approved/Disapproved: 1/15/26, Superintendent Date: 1/15/26**Field trips in excess of a 60-mile radius of the Board office require the approval of the Superintendent.
*ALL Overnight Field Trips and trips using Common Carriers must be approved by the Board and Superintendent.**Upon approval, the school will receive an approved form from the Superintendent. **

School-Related Student Trip Request Form

Event Specific Emergency Action Plan (EAP) for School Sanctioned Nonathletic Event Held Off-Campus

Destination/Venue Renasant Convention Center

Venue Address 255 N Main St, Memphis, TN 38103

Person or email contacted at venue to discuss EAP LeeAnn Shewbart Position/Title of person contacted Director of Events

Date (s) of contact 1/05/26-1/13/26

Is there an Automatic External Defibrillator (AED) on site X Yes No

If yes, where is it located 13 on premise, one in lobby on first floor

Does venue have an emergency response team (ERT)? X Yes No

Process to request AED and/or ERT if needed at the scene Contact Dean Dennis

General Manager of Renasant Center or Public Safety Office

Will a portable AED be taken from school on this trip Yes X No

If yes, who will be responsible for oversight and location of AED N/A

Is any other assigned emergency equipment available on field trip?

If so, list location of equipment _____

The school personnel or volunteer attending in an official capacity who is in charge of the student is responsible for the main components of the EAP. The main components of this Cardiac Emergency Action Plan that need to be communicated include:

- Location of AEDs
- If possible, how to gain access
- Steps that must be taken quickly to initiate the chain of survival
- o Recognition of a sudden cardiac arrest event (assume cardiac arrest in anyone who is collapsed and unresponsive and not breathing)
- o Call 9-1-1 using cell phone or other means of communication
- o Begin Hands-Only CPR (push hard and fast in center of chest about 100times/minute)
- o Retrieve and use the nearest Automated External Defibrillator (AED)
- o Continuing supporting the victim until the local EMS arrives and takes over care
- o Direct EMS to the scene

RELATED PROCEDURES:

09.36 (all procedures)

Review/Revised:11/17/2025

OLDHAM COUNTY BOARD OF EDUCATION
ADMINISTRATIVE PROCEDURE

FIELD TRIP BUS REQUEST FORM

09.36 AP.212

OVERNIGHT **EXTENDED DAY** *(Same day but extends beyond the school day)***DAY TRIP ONLY** School: South Oldham Middle SchoolEmployee(s) In Charge: Mitsuko Martinez Group: BandDestination: EKU Center for the Performing ArtsDate(s) of Trip: March 6 & 7 Time of Departure: TBA Time of Return: TBAApproximate Mileage (one way): 95 miles *Approximate Number of Students: 4-5Number of Chaperones/Adults: 5TOTAL TRANSPORTED: 10 *Number of Buses: 0

Overnight trip - parents are required to attend & schedule their own hotel w/ kids

*{44 Person Maximum for MS/HS} {60 Person Maximum for ELEM}

*These numbers include both students and all adults (bus driver, teachers, coaches, chaperones, etc.)

Method of Transportation (if not by school bus): No bus - parents are required to transport their child.

Common Carriers must be Board approved and should have the 8005.02F accompanying this form

*All tolls are the responsibility of the school or group requesting the trip.

Trip Required or Optional: Optional

If optional, indicate student charges:

Transportation (mileage, driver) \$ 0Admissions \$ 35Other \$ 0Total Charges \$ 35Number of Instructional Days Lost: 1

Justification: Why is the trip necessary? What is to be learned? How will the experience be used and evaluated?

KMEA All-State Honors Band - students audition/compete for admittance at the State level, and if admitted then will perform together in a concert. Note: Parents are required to transport their child to, from and during the trip. Parents are also required to reserve their own hotel room for their child, and are required to stay on-site for the duration of the entire event.

Requested by: Mitsuko Martinez Date: 01/08/2026

APPROVAL/DISAPPROVAL

Approved/Disapproved: Kinda Witak, Principal Date: 1-9-25Approved/Disapproved: , Level Director Date: 1-14-26Approved/Disapproved: , Superintendent Date:

*Field trips in excess of a 60-mile radius of the Board office require the approval of the Superintendent.

*ALL Overnight Field Trips and trips using Common Carriers must be approved by the school board and Superintendent.

Upon approval, the school will receive an approved form from the Superintendent. *

RELATED PROCEDURES:

09.36 (all procedures)

Oldham County Schools
EVENT SPECIFIC EMERGENCY ACTION PLAN (EAP)
FOR
SCHOOL SANCTIONED NONATHLETIC EVENT HELD OFF-CAMPUS

Destination/Venue: EKU Center for the Arts

Venue/Address: 822 Hall Dr. Richmond, KY 40475

Person or email contacted at venue to discuss EAP: Marissa Fischer

Position/Title of person contacted: Box Office Attendant

Date (s) of contact: 9/2/2025

Is there an Automatic External Defibrillator (AED) on site? X yes no

If yes, where is it located? Central Lobby

Does the venue have an emergency response team (ERT)? X yes no

Process to request AED and/or ERT if needed at the scene: Alert staff member in central lobby

Will a portable AED be taken from school on this trip? yes X no If yes, who will be responsible for oversight and location of AED? _____

Is any other assigned emergency equipment available on field trip? yes X no

If so, list location of equipment _____

The school personnel or volunteer attending in an official capacity who is in charge of the student is responsible for the main components of the EAP.

The main components of this Cardiac Emergency Action Plan that need to be communicated include:

- Location of AEDs;
- If possible, how to gain access;
- Steps that must be taken quickly to initiate the chain of survival;
 - Recognition of a sudden cardiac arrest event (assume cardiac arrest in anyone who is collapsed and unresponsive and not breathing);
 - Call 911 using cell phone or other means of communication;
 - Begin Hands-Only CPR (push hard and fast in center of chest about 100 times/minute);
 - Retrieve and use the nearest AED;
 - Continuing supporting the victim until the local EMS arrives and takes over care; and
 - Direct EMS to the scene.

Oldham County Schools
EVENT SPECIFIC EMERGENCY ACTION PLAN (EAP)
FOR
SCHOOL SANCTIONED NONATHLETIC EVENT HELD OFF-CAMPUS

Destination/Venue Crowne Plaza Hotel / Louisville → KYA conference

Venue/Address 830 Phillips Ln, Louisville, KY 40209

Person or email contacted at venue to discuss EAP Rianna Ayala → KYYMCA

Position/Title of person contacted Senior Program Director

Date (s) of contact 8/26/25 (email)

Is there an Automatic External Defibrillator (AED) on site? yes _____ no _____

If yes, where is it located? _____

Does the venue have an emergency response team (ERT)? yes _____ no _____

Process to request AED and/or ERT if needed at the scene _____

Will a portable AED be taken from school on this trip? yes _____ no _____ If yes, who will be responsible for oversight and location of AED? _____

Is any other assigned emergency equipment available on field trip? yes _____ no _____

If so, list location of equipment _____

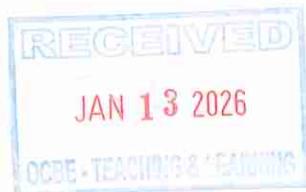
The school personnel or volunteer attending in an official capacity who is in charge of the student is responsible for the main components of the EAP.

The main components of this Cardiac Emergency Action Plan that need to be communicated include:

- Location of AEDs;
- If possible, how to gain access;
- Steps that must be taken quickly to initiate the chain of survival;
 - Recognition of a sudden cardiac arrest event (assume cardiac arrest in anyone who is collapsed and unresponsive and not breathing);
 - Call 911 using cell phone or other means of communication;
 - Begin Hands-Only CPR (push hard and fast in center of chest about 100 times/minute);
 - Retrieve and use the nearest AED;
 - Continuing supporting the victim until the local EMS arrives and takes over care; and
 - Direct EMS to the scene.

School-Related Student Trip Request Form**OVERNIGHT** **EXTENDED DAY** **DAY TRIP ONLY** *(Same day but extends beyond the school day)*School South Oldham High SchoolEmployee(s) in Charge: Chase McCoy Group: SOHS Speech TeamDestination: Marshall University; Huntington West VirginiaDate(s) of Trip: 2/20-21/26 Time of Departure: 8:00 AM Time of Return: 10:00 PMApproximate Mileage (one way): 193Approximate Number of Students: 20Number of Chaperones/Adults: 2TOTAL TRANSPORTED: 22**{44 Person Maximum for HS/HS}{60 Person Maximum for ELEM}***These numbers include both students and all adults (bus driver, teachers, coaches, chaperones, etc.)*Method of Transportation (if not by school bus): Bus 1**Common Carriers must be Board approved and should have the accompanying 09.36 AP.2 with this form****All tolls are the responsibility of the school or group requesting the trip*Trip Required or Optional: Optional

If optional, indicate student charges:

Transportation (mileage, driver) \$50Admissions \$50Other \$Total Charges \$100Number of Instructional Days Lost: 1

Justification: Why is the trip necessary? What is to be learned? How will the experience be used and evaluated? This is an optional tournament for students to attend. This tournament is between regionals and state which allows for additional practice in preparation for the state tournament.

Requested by: Chase McCoyDate: 1/12/2026**APPROVAL/DISAPPROVAL**Approved/Disapproved: Ullman Womble, Principal Date: 1-12-24Approved/Disapproved: Majane, Level Director Date: 1/13/26Approved/Disapproved: , Superintendent Date: **Field trips in excess of a 60-mile radius of the Board office require the approval of the Superintendent.***ALL Overnight Field Trips and trips using Common Carriers must be approved by the Board and Superintendent.**Upon approval, the school will receive an approved form from the Superintendent. **

School-Related Student Trip Request Form

Event Specific Emergency Action Plan (EAP) for School Sanctioned Nonathletic Event Held Off-Campus

Destination/Venue Marshall University; Huntington, West Virginia

Venue Address 1 Marshall Drive, Huntington, WV 25755

Person or email contacted at venue to discuss EAP Dennis Taylor Position/Title of person contacted Speech Coach

Date (s) of contact 11/21/25

Is there an Automatic External Defibrillator (AED) on site X Yes _____ No

If yes, where is it located Smith Hall; Speech and Hearing Center on the 1st Floor right off the main entrance.

Does venue have an emergency response team (ERT)? _____ Yes X No

Process to request AED and/or ERT if needed at the scene Grab nearest AED

Administer, contact 911 and alert Mr. Taylor.

Will a portable AED be taken from school on this trip _____ Yes X No

If yes, who will be responsible for oversight and location of AED _____

Is any other assigned emergency equipment available on field trip?

Bleed Kit; first aid kit

If so, list location of equipment With Chase McCoy

The school personnel or volunteer attending in an official capacity who is in charge of the student is responsible for the main components of the EAP. The main components of this Cardiac Emergency Action Plan that need to be communicated include:

- Location of AEDs
- If possible, how to gain access
- Steps that must be taken quickly to initiate the chain of survival
- o Recognition of a sudden cardiac arrest event (assume cardiac arrest in anyone who is collapsed and unresponsive and not breathing)
- o Call 9-1-1 using cell phone or other means of communication
- o Begin Hands-Only CPR (push hard and fast in center of chest about 100times/minute)
- o Retrieve and use the nearest Automated External Defibrillator (AED)
- o Continuing supporting the victim until the local EMS arrives and takes over care
- o Direct EMS to the scene

RELATED PROCEDURES:

09.36 (all procedures)

Review/Revised:11/17/2025

School-Related Student Trip Request Form

Event Specific Emergency Action Plan (EAP) for School Sanctioned Nonathletic Event Held Off-Campus

Destination/Venue Galt House

Venue Address 140 N. 4th Street, Louisville, KY 40202

Person or email contacted at venue to discuss EAP Kassie Burawski Position/Title of person contacted Events Manager

Date (s) of contact 11/3/25

Is there an Automatic External Defibrillator (AED) on site X Yes _____ No _____

If yes, where is it located On the wall near the security desk 1st floor Riverfront Plaza

Does venue have an emergency response team (ERT)? X Yes _____ No _____

Process to request AED and/or ERT if needed at the scene _____

Contact the Front Desk

Will a portable AED be taken from school on this trip _____ Yes X No _____

If yes, who will be responsible for oversight and location of AED _____

Is any other assigned emergency equipment available on field trip?

No

If so, list location of equipment _____

The school personnel or volunteer attending in an official capacity who is in charge of the student is responsible for the main components of the EAP. The main components of this Cardiac Emergency Action Plan that need to be communicated include:

- Location of AEDs
- If possible, how to gain access
- Steps that must be taken quickly to initiate the chain of survival
- o Recognition of a sudden cardiac arrest event (assume cardiac arrest in anyone who is collapsed and unresponsive and not breathing)
- o Call 9-1-1 using cell phone or other means of communication
- o Begin Hands-Only CPR (push hard and fast in center of chest about 100times/minute)
- o Retrieve and use the nearest Automated External Defibrillator (AED)
- o Continuing supporting the victim until the local EMS arrives and takes over care
- o Direct EMS to the scene

RELATED PROCEDURES:

09.36 (all procedures)

Review/Revised:11/17/2025

School-Related Student Trip Request Form**OVERNIGHT** **EXTENDED DAY** **DAY TRIP ONLY** *(Same day but extends beyond the school day)*School South Oldham High SchoolEmployee(s) in Charge: Chase McCoy & Bryan Jack Group: Speech and Debate TeamDestination: Murray State University; Murray, KentuckyDate(s) of Trip: 03/12-14/2026 Time of Departure: 2:00 PM Time of Return: 10:00 PMApproximate Mileage (one way): 245Approximate Number of Students: 30Number of Chaperones/Adults: 2TOTAL TRANSPORTED: 32**{44 Person Maximum for HS/HS}{60 Person Maximum for ELEM}***These numbers include both students and all adults (bus driver, teachers, coaches, chaperones, etc.)*Method of Transportation (if not by school bus): Parent Transport**Common Carriers must be Board approved and should have the accompanying 09.36 AP.2 with this form****All tolls are the responsibility of the school or group requesting the trip*Trip Required or Optional: Required

If optional, indicate student charges:

Transportation (mileage, driver)	\$0
Admissions	\$0
Other	\$0
Total Charges	\$0

Number of Instructional Days Lost: 0.5

Justification: Why is the trip necessary? What is to be learned? How will the experience be used and evaluated? This trip is necessary as it is the Kentucky High School Speech League's state tournament. This is the final tournament where students are competing for the chance to be named state champions and represent

Oldham County Schools to the highest degree.

Requested by: Chase McCoyDate: 01/07/2026**APPROVAL/DISAPPROVAL**Approved/Disapproved: Melissa Woolley, PrincipalDate: 1-7-26Approved/Disapproved: M. Jones, Level DirectorDate: 1/9/26

Approved/Disapproved: _____, Superintendent

Date: _____

Field trips in excess of a 60-mile radius of the Board office require the approval of the Superintendent.*ALL Overnight Field Trips and trips using Common Carriers must be approved by the Board and Superintendent.**Upon approval, the school will receive an approved form from the Superintendent. **

School-Related Student Trip Request Form

Event Specific Emergency Action Plan (EAP) for School Sanctioned Nonathletic Event Held Off-Campus

Destination/Venue Murray State University

Venue Address 1375 Chestnut St, Murray, KY 42071

Person or email contacted at venue to discuss EAP Steve Meadows Position/Title of person contacted Kentucky High School Speech League President

Date (s) of contact 01/06/2026

Is there an Automatic External Defibrillator (AED) on site X Yes _____ No _____

If yes, where is it located See PDF for the full list of AEDs on campus.

Does venue have an emergency response team (ERT)? _____ Yes X No _____

Process to request AED and/or ERT if needed at the scene Find nearest AED and administer. Alert Steve Meadows and call 911.

Will a portable AED be taken from school on this trip _____ Yes X No _____

If yes, who will be responsible for oversight and location of AED _____

Is any other assigned emergency equipment available on field trip?

first aid, bleed kit

If so, list location of equipment With Chase McCoy.

The school personnel or volunteer attending in an official capacity who is in charge of the student is responsible for the main components of the EAP. The main components of this Cardiac Emergency Action Plan that need to be communicated include:

- Location of AEDs
- If possible, how to gain access
- Steps that must be taken quickly to initiate the chain of survival
- o Recognition of a sudden cardiac arrest event (assume cardiac arrest in anyone who is collapsed and unresponsive and not breathing)
- o Call 9-1-1 using cell phone or other means of communication
- o Begin Hands-Only CPR (push hard and fast in center of chest about 100times/minute)
- o Retrieve and use the nearest Automated External Defibrillator (AED)
- o Continuing supporting the victim until the local EMS arrives and takes over care
- o Direct EMS to the scene

RELATED PROCEDURES:

09.36 (all procedures)

Review/Revised:11/17/2025

AED Locations, Models

Building	Location	Manufacturer/Model Serial Number
Alexander Hall	1 st Floor, next to elevator, Room 1002	Philips Heart Start Adult and Pediatric Infant Pads A16f-01119
Alexander Hall	2 nd Floor, South Atrium	Philips Heart Start Adult Pads A14F-01471
Alexander Hall	3 rd Floor, next to the North elevator & the Faculty Office Suite	Philips Heart Start Adult Pads A14F-00906
Applied Science	1 st Floor Lobby	Philips Heart Start Adult Pads A21G-05658
Applied Science	4 th Floor North	Philips Heart Start Adult Pads A14D-02298
Blackburn Science	1 st Floor South Hallway	Philips Heart Start Adult Pads A23F-07218
Biology	2 nd Floor, next to Faculty Office Suite	Philips Heart Start Adult Pads A20B-06715
Breathitt Vet Center	First Aid Room	Zoll AED Plus Adult Pads
Business Building	North Elevator Lobby, 1st Floor	Philips Heart Start Adult Pads A19J-09125
Carman Pavilion	Expo Center	
Carr Health	Main Entrance, West side	Philips Heart Start Adult Pads Ped Infant Pads A16F-01000
Carr Health	Ground Floor, next to Equipment Room, North Gym	Phillips Heart Start Adult and Pediatric Infant Pads A22J-023242
Carr Health	2nd Floor, next to Room 207	Defibtech Lifeline Adult Ped Infant Pads DDU-L001 Rev.D DDU-100A
Central Plant	Office	Phillips Heart Start Adult Pads A24I-05081
CFSB Center	Lower A entrance to the court	*All inspected and maintained by Athletics*
CFSB Center	Practice Gym	*All inspected and maintained by Athletics*
Chemistry	2 nd Floor, next to the Lab Safety Office	Phillips Heart Start Adult Pads A19D-06374
Curris Center	1 st Floor, next to Enrollment Mgt.	Physio Control Lifepak CR Plus 32007-31-010 Adult Pads
Curris Center	2 nd Floor, next to the Post Office main entrance	Medtronic Lifepak CR Plus 43491904 Adult Pads

Building	Location	Manufacturer/Model Serial Number
Curris Center	3 rd Floor, next to the Mississippi Room	Physio Control Lifepak CR Plus 43487284 Adult Pads
Engineering & Physics	Front Lobby	Phillips Heart Start Adult Pads A21F-03412
Equine Center	Front Office Lobby	Philips Heart Start Adult Pads A17B-03298
Expo Center	Front Lobby	Defibtech Adult Pads, Pediatric Infant Pads
Hopkinsville	NONE	
Facilities Management	Front Office Reception Area	Physio Control Lifepak CR Plus 43925746 Adult Pads
Faculty Hall	1st Floor Elevator Lobby	Philips Heart Start Adult Pads A19K-03256
Faculty Hall	3 rd Floor Elevator Lobby	Philips Heart Start Adult Pads A21E-04142
Faculty Hall	6 th Floor Elevator Lobby	Philips Heart Start Adult Pads A21J-03351
Fine Arts	1 st Floor Lobby	Philips Heart Start Adult Pads A20A-05851
Fine Arts	5 th Floor Lobby	Philips Heart Start A21J-05050 Adult Pads
Fine Arts	7 th Floor Lobby	Zoll AED Plus Adult Pads
General Services	Facilities Management Building	
Hancock Bio Station	Main floor lobby, wall-mounted	Lifepak CR Plus
Heritage Hall	2 nd Floor Elevator Lobby	Philips Head Start Adult Pads A23G-12252
Howton Ag	1 st Floor Lobby	Philips Heart Start Adult Pads A23F-01791
Industry & Technology Center	1 st Floor, outside OSH Office	Medtronic Lifepak 500 Adult Pads 30123650
Lovett Auditorium	Left of the main entrance, next to Room 102	Philips Heart Start Adult Pads A11G-00387 ALARM TO MSU PD
Lowry Center	Pogue Library Lobby	
Mason Hall	1 st Floor Front Office Student Worker Desk	Philips Heart Start Adult Pads A24L-012121
Miller Golf Course	Clubhouse, Pro Shop	Medtronic Lifepak 500 Adult Pads
MSU Police	Equipment Room	
Paducah	Lobby	Philips Heart Onsite
Pogue Library	Front Desk Lobby	Philips Heart Start Adult Pads A23D-04391
Sparks Hall	First Floor Elevator Lobby	Philips Heart Start Adult Pads A19K-03201

Building	Location	Manufacturer/Model Serial Number
Stewart Stadium	Various locations – portable AEDs to take to games and practices	Trainers Office
Stewart Stadium	1 st floor, by Weight Room (North end)	Philips Heart Start Adult Pads A16G05303
Waterfield Library	Between the doors of the main entrance	Philips Heart Start Adult Pads Alarm to MSU PD A11G-00356
Wellness Center	Entrance to the weight room	Medtronic Lifepak CR Plus Adult Pads 43454767
Wellness Center	Director's Office, Intramural Sports	Physio Control Lifepak CR Plus Adult Pads
Wells Hall	2 nd Floor, Room 214	Philips Heart Start Adult Pads A21E-04268
Wilson Hall	1 st floor, next to MSU News Office	Phillips Heart Start AA20C-00125
Winslow Cafeteria	Near Room 119	Physio Control Lifepak CR Plus Adult Pads
Wrather Museum	Main Lobby Office	Philips Heart Smart Adult Pads A23F-07370

OLDHAM COUNTY BOARD OF EDUCATION
ADMINISTRATIVE REGULATION

FIELD TRIP BUS REQUEST FORM

8005.01F

Related to: Policy 8005, 4055, 8005AR; 8005.001F

OVERNIGHT

EXTENDED DAY

DAY TRIP ONLY

(Same day but extends beyond the school day)

School: East Oldham Middle School

Employee(s) In Charge: Kendall Ross Group: KUNA

Destination: Crowne Plaza Hotel (Louisville, KY)

Date(s) of Trip: 3/22/25-3/24/26 Time of Departure: 3/22 (noon) Time of Return: 3/24 (noon)

Approximate Mileage (one way): 30 *

Approximate Number of Students: 20

Number of Chaperones/Adults: 1

TOTAL TRANSPORTED: 21 *

Number of Buses: 0

*{44 Person Maximum for MS/HS} {60 Person Maximum for ELEM}

*These numbers include both students and all adults (bus driver, teachers, coaches, chaperones, etc.)

Method of Transportation (if not by school bus): Parent Drop Off & Pick Up

Common Carriers must be Board approved and should have the 8005.02F accompanying this form

*All tolls are the responsibility of the school or group requesting the trip.

Trip Required or Optional: Optional

If optional, indicate student charges:

Transportation (mileage, driver)	\$ 0
Admissions	\$ 300
Other	\$ 35
Total Charges	\$ 335

Number of Instructional Days Lost: 2

Justification: Why is the trip necessary? What is to be learned? How will the experience be used and evaluated?

The Kentucky United Nations Assembly (KUNA) is a 3-day, experiential-learning conference in which students participate directly in simulated international diplomacy. KUNA offers students the opportunity to experience the richness of cultures from around the world, develop empathy, and hone their critical thinking skills while engaging with a wide variety of perspectives and global issues.

Requested by: Kendall Ross Date: 01/06/2026

APPROVAL/DISAPPROVAL

Approved/Disapproved: *CMR*, Principal Date: 1-8-26

Approved/Disapproved: *JW*, Level Director Date: 1-12-26

Approved/Disapproved: *JKW*, Superintendent Date: _____

*Field trips in excess of a 60-mile radius of the Board office require the approval of the Superintendent.

*ALL Overnight Field Trips and trips using Common Carriers must be approved by the school board and Superintendent.

Upon approval, the school will receive an approved form from the Superintendent. *

Adopted

Oldham County Board of Education

September 2, 1980

Revised: February 1, 1985, September 1991, April 29, 1996, June 19, 1998, June 9, 1999, November 23, 1999, April 2, 2001, March 25, 2004, March 22, 2005, July 27, 2005, August 10, 2006, June 28, 2007, March 11, 2008, July 16, 2008, February 4, 2014, July 17, 2015, January 6, 2017, January 18, 2019

No bus

