



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

Organization: **Marion County Public Schools** Employee: **JAMIE BROWN**

Assigned To: **User - kim.hood**

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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	Jamie Brown
* School/Work site	Marion County High School
* Date(s) of leave	March 4-6, 2026
* Time of departure	11:00 am
* Destination Name & Address	Central Bank Center/430 W Vine St, Lexington, KY 40507
* Purpose/Rationale for attending	KY Senior Beta Convention; academic/arts/performance competitions, state officer leading the convention, running a state officer candidate
* Number of students involved	106

* Substitute needed (please remember to enter your absence in Aesop, even if a substitute is not required.)	Yes
<i>Number of days (Avg. \$100 a day)</i>	2.5
<i>Substitute code</i>	MCHS Activity-Beta
* Registration	No
<i>Registration cost</i>	
<i>Registration code</i>	
* Mileage	No
<i>Number of miles</i>	
<i>Number of days</i>	
* Lodging	No
<i>Cost per night</i>	
<i>Number of nights</i>	
<i>Lodging rate</i>	
* Meals	No
<i>Estimated total meal cost</i>	
<i>Meals/Mileage/Parking/Lodging Code</i>	

✳ Grand total of expenses 250

***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

Substitute needed at 11:25 a.m. on Wednesday, March 4 for a PM substitute plus full days on March 5-6, if we are in school for make-up days. As of 1/4/26, March 5-6 are non-school days.

Reviewed/Revised: 01/12/2015

 **School-Related Student Trip Request Form**

09.36 AP.21

✳ Faculty member(s) sponsoring trip Jamie Brown, Erin Benton, Sterling Newton, Laura Mattingly

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

✳ Destination name Central Bank Center

✳ Destination address 430 W. Vine St, Lexington, KY 40507

✳ Destination phone 859-233-4567

Lodging name Hilton Lexington Downtown

Lodging address 369 W. Vine St, Lexington, KY

Lodging phone 859-231-9000

✳ Date(s) of trip March 4-6, 2026

✳ Time of departure 11:00 am

✳ Purpose/Educational value
KY Senior Beta Convention; academic/arts/performance competitions, state officer leading the convention, running a state officer candidate

✳ Source of funding for trip Student/Club

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

✳ Bill trip expenses to (i.e. Sponsoring organization, school council, Board) MCHS Beta Club

✳ Number of students 106

✳ Number of faculty sponsors 7

✳ Other chaperones 4

✳ Total number of participants 117

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

MCHS Beta Club Field Trip Participant List March 4-6 2026.pdf [view](#)
Added 1/4/2026 8:09:00 PM

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)

3 buses and the van/trailer pulled by a bus driver. The van/trailer can be left at the Hilton for the duration of the convention. On the return pick up on March 6, we need to be taken to the restaurants in the shopping center at the corner of Man-o-War and Harrodsburg Rd at Palomar Centre Dr for lunch before returning to Lebanon.

* Destination Name & Address Central Bank Center, 430 W. Vine St, Lexington, KY

* Date(s) of trip March 4-6, 2026

* Group requesting bus/SUV MCHS Beta

* Purpose of trip Kentucky National Beta Convention

* Bus/SUV pick-up time 11:00 am

* Bus/SUV return time 02:30 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 MCHS Activity/Beta

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.

MCHS Beta Convention bus list-March 4-6 2026.xlsx - Bus #1.pdf [view](#)
Added 1/4/2026 8:12:00 PM

* Employee Signature

Signed: **Jamie L. Brown**
Stamped: Sun Jan 04 2026 21:11:58 GMT-0500 (Eastern Standard Time); 1/4/2026 8:11:45 PM; 2026-01-05 02:11:45Z; 74.132.62.190; Employee - #321 - JAMIE BROWN
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: **Robby Peterson**
Stamped: Mon Jan 12 2026 11:01:54 GMT-0500 (Eastern Standard Time); 1/12/2026 10:01:39 AM; 2026-01-12 16:01:39Z; 170.185.150.206; Employee - #371 - JOSEPH PETERSON
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

Dropdown menu with a downward arrow.

* Supervisor Signature

Not Signed

Read-Only

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.

* Field Trip Designee Signature

Not Signed

Read-Only

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.

* 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

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](#)

[Remove Applicants or Employees](#)

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	3/1/2026-3/2/2026
* Time of departure	01:00 pm
* Destination Name & Address	Central Bank Center 430 W Vine St Lexington, KY 40507 & Hilton Lexington/Downtown 369 W Vine St Lexington, KY 40507
* Purpose/Rationale for attending	Jr Beta State Convention
* Number of students involved	62

* 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) 1

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 125

***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 Jr Beta State Convention
 - * Destination address 430 W Vine St Lexington, KY 40507
 - * Destination phone (859) 233-4567
 - Lodging name Hilton Lexington/Downtown
 - Lodging address 369 W Vine St Lexington, KY 40507
 - Lodging phone 859-306-0815
 - * Date(s) of trip 3/1/26 - 3/2/26
 - * Time of departure 08:30 pm
 - * Purpose/Educational value
Jr Beta State 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) Lebanon Middle School Jr Beta
 - * Number of students 62
 - * Number of faculty sponsors 6
 - * Other chaperones 1
 - * Total number of participants 69
 - * Supervision (Attach list of names of students and chaperones)

LMS 2026 State Beta List.pdf Added 1/19/2026 11:18:00 AM	view
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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)

2 Buses

 Destination Name & Address Central Bank Center 430 W Vine St Lexington, KY 40507

 Date(s) of trip 3/1/26 - 3/2/26

 Group requesting bus/SUV Lebanon Middle School Jr Beta Club

 Purpose of trip Jr Beta State Convention

 Bus/SUV pick-up time 01:00 pm

 Bus/SUV return time 08:30 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.

2026 State Bus List.xlsx
Added 1/19/2026 11:23:00 AM

[view](#)

 Employee Signature

Signed: **Kara Clark**

Stamped: Mon Jan 19 2026 12:23:07 GMT-0500 (Eastern Standard Time); 1/19/2026 11:22:52 AM; 2026-01-19 17:22:52Z; 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: Tue Jan 27 2026 15:08:22 GMT-0500 (Eastern Standard Time); 1/27/2026 2:08:23 PM; 2026-01-27 20:08:23Z; 170.185.150.173; Employee - #29 - SARA BRADY

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 Direct this field trip packet to



*** Supervisor Signature**

Not Signed	Read-Only
<p>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.</p>	

*** Field Trip Designee Signature**

Not Signed	Read-Only
<p>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.</p>	

*** Date of Board approval**

*** Superintendent Signature**

Not Signed	Read-Only
<p>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.</p>	

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