

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	6/24/26-6/27/26
* Time of departure	06:00 am
* Destination Name & Address	Gaylord Opryland Resort & Convention Center 2800 Opryland Dr, Nashville, TN 37214
* Purpose/Rationale for attending	Jr Beta National Convention
* Number of students involved	38

* Substitute needed (please remember to enter your absence in Aesop, even if a substitute is not required.) No

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

Substitute code

* 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 0

***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

12 students will be staying with the club at the Gaylord Opryland Resort - The remaining students will be staying with their parent/guardians in their own hotel rooms.

Reviewed/Revised: 01/12/2015

 **School-Related Student Trip Request Form**

09.36 AP.21

- * Faculty member(s) sponsoring trip 1
- * Type of trip (i.e. classroom, organization, club, athletic, band) Club
- * Destination name Gaylord Opryland Resort
- * Destination address 2800 Opryland Dr, Nashville, TN 37214
- * Destination phone (615) 889-1000

Lodging name

Lodging address

Lodging phone

- * Date(s) of trip 6/24/26-6/27/26
- * Time of departure 06:00 am
- * Purpose/Educational value
Jr Beta National 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 38
- * Number of faculty sponsors 1
- * Other chaperones Lisa Minor, Sara Brady
- * Total number of participants 40

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

2026 LMS Jr Beta Nationals Student and Chaperone List.pdf	view
Added 4/13/2026 8:02:00 AM	

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)
SUV (Other students will be transported by their parent/guardian)

- * Destination Name & Address: Gaylord Opryland Resort
- * Date(s) of trip: 6/24/26-6/27/26
- * Group requesting bus/SUV: Lebanon Middle School Jr Beta Club
- * Purpose of trip: Jr Beta National Convention
- * Bus/SUV pick-up time: 06:00 am
- * Bus/SUV return time: 01:00 pm
- * When transporting items that cannot be held in lap of students, under storage will be required to store these items: Under storage will not 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 LMS Jr Beta Nationals SUV List.pdf	view
Added 4/13/2026 8:04:00 AM	

* Employee Signature

Signed: **Kara Clark**

Stamped: Mon Apr 13 2026 09:04:34 GMT-0400 (Eastern Daylight Time); 4/13/2026 8:04:35 AM; 2026-04-13 13:04:35Z; 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: Mon Apr 20 2026 16:37:59 GMT-0400 (Eastern Daylight Time); 4/20/2026 3:38:00 PM; 2026-04-20 20:38:00Z; 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 Read-Only

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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