School Field Trip Packet - OvernightGreater than 100 miles with District Transportation

Organization: **Marion County Public Schools** Employee: **DAVID HIBBARD**
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	David Hibbard
School/Work site	Marion County High School
Date(s) of leave	Sept 17-19, 2026
Time of departure	09:00 pm
Destination Name & Address	Brescia College Owensboro, KY
Purpose/Rationale for attending	State 2A Tournament
Number of students involved	9

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	
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	David Hibbard
Type of trip (i.e. classroom, organization, club, athletic, band)	Athletic
Destination name	Brescia College
Destination address	Owensboro, KY
Destination phone	502-867-1258
Lodging name	
Lodging address	
Lodging phone	
Date(s) of trip	Sept 17-19, 2026
Time of departure	09:00 pm

Purpose/Educational value
State 2A Tournament

Source of funding for trip	MCHS Volleyball & Athletics (transport)

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

Bill trip expenses to (i.e. Sponsoring organization, school council, Board)	Volleyball & Athletics (transport)
Number of students	9
Number of faculty sponsors	1
Other chaperones	1
Total number of participants	11

Supervision (Attach list of names of students and chaperones)

26 Varsity Roster - Sheet1 (1).pdf view
Added 9/4/2026 9:44:00 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)

Bus

Destination Name & Address	Brescia College
Date(s) of trip	Sept 17-19, 2026
Group requesting bus/SUV	Volleyball
Purpose of trip	Class 2A Tournament
Bus/SUV pick-up time	09:00 pm
Bus/SUV return time	05:00 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	51519180898

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.

26 Varsity Roster - Sheet1 (1).pdf view
Added 9/4/2026 9:45:00 AM

Employee Signature

Signed: **David Hibbard**

Stamped:Fri Sep 04 2026 10:44:35 GMT-0400 (Eastern Daylight Time);9/4/2026 9:44:36 AM;2026-09-04 14:44:36Z;170.185.150.199;Employee - #339 - DAVID HIBBARD

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:Fri Sep 04 2026 11:16:22 GMT-0400 (Eastern Daylight Time);9/4/2026 10:16:21 AM;2026-09-04 15:16:21Z;170.185.150.214;Employee - #371 - JOSEPH PETERSON

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Direct this field trip packet to

Supervisor Signature

Not Signed Read-Only

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* Field Trip Designee Signature

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* Date of Board approval
* Superintendent Signature

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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 - OvernightGreater than 100 miles with District Transportation

Organization: **Marion County Public Schools** Employee: **JAMIE BROWN**
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	Jamie Brown
School/Work site	Marion County High School
Date(s) of leave	October 12-13. 2026
Time of departure	08:00 am

Destination Name & Address
Sloan Convention Center, 1021 Wilkinson Trace, Bowling Green, KY

Purpose/Rationale for attending
National Beta Regional Leadership Summit; student serving as a Leadership Representative, another interviewing for Lead Rep and students participating in leadership challenges and sessions

Number of students involved	50

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	MCHS Activity-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	100

***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	Jamie Brown, Laura Mattingly, Erin Benton
Type of trip (i.e. classroom, organization, club, athletic, band)	Club
Destination name	Sloan Convention Center
Destination address	1021 Wilkinson Trace, Bowling Green, KY
Destination phone	270-745-0088
Lodging name	Hilton Garden Inn
Lodging address	1020 Wilkinson Trace, Bowling Green, KY
Lodging phone	270-781-6778
Date(s) of trip	October 12-13, 2026
Time of departure	08:00 am

Purpose/Educational value
National Beta Regional Leadership Summit

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
Number of students	50
Number of faculty sponsors	3
Other chaperones	1
Total number of participants	54

Supervision (Attach list of names of students and chaperones)

MCHS Beta Field Trip Participant List-Oct 12-13 2026.pdf view
Added 9/7/2026 8:45:00 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)

1 bus (Plus Kara Clark is requesting one bus for LMS Beta that some MCHS students will also be on. On the bus lists, see the second tab at the bottom for our partial second bus roster. Kara will submit the official bus request for bus #2)--The summit concludes at 2 p.m. EST on October 13. Can a bus be there to pick us up in Bowling Green at 3 p.m. EST?

Destination Name & Address	Sloan Convention Center, 1021 Wilkinson Trace, Bowling Green
Date(s) of trip	October 12 and October 13 return
Group requesting bus/SUV	MCHS Beta
Purpose of trip	National Beta Leadership Summit
Bus/SUV pick-up time	08:00 am
Bus/SUV return time	05:00 pm
When transporting items that cannot be held in lap of students, under storage will be required to store these items.	Under storage will 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 Oct 12-13 2026 bus list.xlsx - MCHS Bus.pdf view
Added 9/7/2026 8:49:00 PM

Employee Signature

Signed: **Jamie Brown**

Stamped:Mon Sep 07 2026 21:49:30 GMT-0400 (Eastern Daylight Time);9/7/2026 8:49:28 PM;2026-09-08 01:49:28Z;74.132.62.190;Employee - #321 - JAMIE BROWN

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Principal Signature

Signed: **Robby Peterson**

Stamped:Tue Sep 08 2026 08:46:50 GMT-0400 (Eastern Daylight Time);9/8/2026 7:46:50 AM;2026-09-08 12:46:50Z;170.185.150.214;User - robby.peterson - robby.peterson@marion.kyschools.us

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Direct this field trip packet to Dana Thomas

Supervisor Signature

Not Signed Read-Only

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Field Trip Designee Signature

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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