

Administrative Procedure

Request for Field Trip

Teacher's Name Michelle Johnston & Vicki Crenshaw ^{School} OCCHS

Destination (include address) Chattanooga TN - State HOSA Conference

The request is for a field trip listed in the current board-approved edition of the Obion County School District's Field Trip Manual

The request is for a field trip which is not listed in the current board-approved edition of the Obion County School District's Field Trip Manual

Grade Level (elementary) 10-12 Subject Area (secondary) Health Science

1. How is this trip an integral part of an approved course of study? Students in Health Science Classes who competed at Regionals & placed for State

2. Prior to this field trip the class will be involved in the following preliminary activities to prepare for this trip:

- a. Students who competed @ Regional level will continue
- b. to work on competition areas to compete at State.
- c. _____
- d. _____

3. Follow-up activities for this unit will include the following activities:

- a. _____
- b. _____
- c. _____
- d. _____

4. Transportation Requested: yes - Charter Bus if possible through West Tenn. Motor Coach

5. Date of Trip: March 22 - March 25, 2009

6. Substitutes Requested (if necessary): yes - 2 for Johnston & Crenshaw

7. Parental Permission Forms Received: yes

8. Plans of Students Not Going On Trip: Students will have assignment planned for these dates.

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9. List of Chaperones (All High School trips must have 1 chaperone per 20 students. All Elementary trips must have 1 chaperone per 10 students. Overnight field trips require board-approved chaperones):

Vicki Orenshaw Randall Orenshaw
Michelle Johnston Daniel Johnston

10. What is the total number of students going on the trip? 15

11. How much regular classroom instructional time will be missed? 3 days

12. What is the approximate cost of the trip per student?

13. How are you funding the trip? Perkins Funds / Vocational / HOSA

14. Place a check by the expenses you plan to submit for reimbursement:

- (1) Registration
- (2) Meals
- (3) Lodging (include name of hotel and cost per night) 129.00/night x 3 nights
- (4) Mileage
- (5) Other anticipated expenses such as parking (specify) _____

Paid for Vocational Funds will not need reimbursement except for meals.

Signed: Michelle Johnston Date: 2/5/09
(Teacher Requesting Trip)

Approved By: Linda C. Short Date: 2/5/09
(Signature of Principal)

Approved By: [Signature] Date: 2/5/09
(Signature of Assistant Director of Schools)

Approved By: _____ Date: _____
(Signature of Director of Schools)

Approved by Board (if necessary): _____

Remarks or Conditions: _____