

## Administrative Procedure

## Request for Field Trip

Teacher's Name Joe Wade School CTCDestination (include address) Miller Mott Technical College 801 Space Park North  
Columbia, TN 31072 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 ManualGrade Level (elementary) \_\_\_\_\_ Subject Area (secondary) Welding1. How is this trip an integral part of an approved course of study? Skills USA membership and competition align w/ state standards for CTE

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

- a. Study & preparation on contest activity
- b. review blueprint reading
- c. PRACTICE VARIOUS WELDS AND APPLICATIONS
- d. \_\_\_\_\_

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

- a. EVALUATION OF CONTEST AND ANY WAY IMPROVEMENT
- b. CAN BE MADE TO BETTER PREPARE FOR NEXT YEARS
- c. CONTEST.
- d. \_\_\_\_\_

4. Transportation Requested: vehicle from bus garage5. Date of Trip: Leave March 13 - Return March 146. Substitutes Requested (if necessary): 1 for 3/13/097. Parental Permission Forms Received: YES8. Plans of Students Not Going On Trip: Classroom study and bookwork

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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):

Joe Wade

10. What is the total number of students going on the trip? 1

11. How much regular classroom instructional time will be missed? 1/2 day

12. What is the approximate cost of the trip per student? 0 no cost to student

13. How are you funding the trip? Perkins CTO funds

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) \_\_\_\_\_
- (4) Mileage
- (5) Other anticipated expenses such as parking (specify) \_\_\_\_\_

Signed: Joe Wade Date: 3/11/09  
(Teacher Requesting Trip)

Approved By: Bussell Date: 3-10-09  
(Signature of Principal)

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature of Assistant Director of Schools)

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature of Director of Schools)

Approved by Board (if necessary): \_\_\_\_\_

Remarks or Conditions: \_\_\_\_\_