

Administrative Procedure

Request for Field Trip

Teacher's Name Laura Pitts School OCHS

Destination (include address) Nashville TN Opryland Hotel

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 all subjects

Grade Level (elementary) \_\_\_\_\_ Subject Area (secondary) Beta Club

1. How is this trip an integral part of an approved course of study? Competition in different academic subject areas and art areas

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

- a. Service projects including working with Senior citizens, elementary schools, and cdc's
- b. Meeting to prepare for competitions
- c. \_\_\_\_\_
- d. \_\_\_\_\_

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

- a. Meet with the school board
- b. Share with other Beta members
- c. Prepare to be more competitive next year
- d. \_\_\_\_\_

4. Transportation Requested: 1 Bus

5. Date of Trip: April 13 - 15 2009

6. Substitutes Requested (if necessary): 2

7. Parental Permission Forms Received: 16

8. Plans of Students Not Going On Trip: Work in class

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

Laura Pitts  
Casey Webb

10. What is the total number of students going on the trip? 16

11. How much regular classroom instructional time will be missed? 17 hours

12. What is the approximate cost of the trip per student? \$60 (meals only)

13. How are you funding the trip? Fundraisers (selling Homecoming shirts)

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: Laura Pitts Date: 4/2/09  
(Teacher Requesting Trip)

Approved By: J. C. Just Date: 4/2/09  
(Signature of Principal)

Approved By: [Signature] Date: 4/2/09  
(Signature of Assistant Director of Schools)

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

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

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