

Administrative Procedure

Request for Field Trip

Teacher's Name Lynsey Butler School OCCHS

Destination (include address) Doyle, TN

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) _____ Subject Area (secondary) Agriculture

1. How is this trip an integral part of an approved course of study? This is State FFA Leadership

Training Camp

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

a. FFA Member (Mostly FFA Officers)

b. _____

c. _____

d. _____

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

a. Leadership skills learned will be used throughout life, but especially during their officer term.

b. _____

c. _____

d. _____

4. Transportation Requested: Yes- 1 Bus for OCCHS FFA & South Fulton FFA

5. Date of Trip: June 15th-19th

6. Substitutes Requested (if necessary): N/A

7. Parental Permission Forms Received: Will have prior to the trip.

8. Plans of Students Not Going On Trip: N/A

05/MAY. 11. 2009: 1:17PM 31-530 BION CO BOARD OF ED

Administrative Procedure

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):

Myself & South Fulton Ag Teacher (Male)

10. What is the total number of students going on the trip? OCCHS 15- SF 5

11. How much regular classroom instructional time will be missed? None

12. What is the approximate cost of the trip per student? \$50 *This trip is not required, but encouraged.

13. How are you funding the trip? The other \$100 will be paid by OCCHS FFA.

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: Lynette Butler

(Teacher Requesting Trip)

Date: 5/11/09

Approved By: Linda C. Short

(Signature of Principal)

Date: 5/11/09

Approved By: [Signature]

(Signature of Assistant Director of Schools)

Date: 5/11/09

Approved By: _____
(Signature of Director of Schools)

Date: _____

Approved by Board (if necessary): _____

Remarks or Conditions: Total cost per student is \$150 (\$50 paid by student, \$100 paid by FFA).