

*Overnight*

# Request for Field Trip

Teacher's Name Lynsey Butler School OCCHS

Destination (include address) Fall Creek Falls

- 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 9-12

1. How is this trip an integral part of an approved course of study? This is State Forestry Camp which is an integral part of the Wildlife and Forestry courses taught at OCCHS.

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

- a. Students must show an interest in Wildlife and Forestry.
- b. Most students who attend the camp are planning on a future career in this area.
- c. \_\_\_\_\_
- d. \_\_\_\_\_

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

- a. Students will bring back a memory full of ideas, concepts, knowledge, and leadership skills.
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_

4. Transportation Requested: 1 car or van

5. Date of Trip: May 30th thru June 4th

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

7. Parental Permission Forms Received: Will collect prior to departure

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

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):

Lynsey Butler, Nick Lucas, or Phillip Darnell

10. What is the total number of students going on the trip? 2-4

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

12. What is the approximate cost of the trip per student? \$0

13. How are you funding the trip? 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) gasoline

Signed: Lynsey Butler  
(Teacher Requesting Trip)

Date: 4/7/10

Approved By: Linda C. Huggins  
(Signature of Principal)

Date: 4/7/10

Approved By: Jeff Fuller  
(Signature of Assistant Director of Schools)

Date: 4/7/10

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

Date: \_\_\_\_\_

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

Remarks or Conditions: Reimbursement for meals will only be for days of departure and return