

Request for Field Trip

Teacher's Name Brandi S. Cantrell

School South Fulton High School

Destination (include address) 2800 Opryland Drive, Nashville Tn. (Gaylord 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

Grade Level (elementary) _____

Subject Area (secondary) 9-12

1. How is this trip an integral part of an approved course of study? This trip is to compete at the national level in the High School Beta Club convention.

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

a. Students will rework the scrapbook in order to ready it to national competition.

b. _____

c. _____

d. _____

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

a. _____

b. _____

c. _____

d. _____

4. Transportation Requested: School bus, or 15 passenger van + regular van

5. Date of Trip: June 21-24

6. Substitutes Requested (if necessary): None, during summer break.

7. Parental Permission Forms Received: Will be obtained prior to departure

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

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):

Brandi S. Cantrell, Lori Martin

10. What is the total number of students going on the trip? 40 (max)

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

12. What is the approximate cost of the trip per student? \$150

13. How are you funding the trip? club funds, fundraisers

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

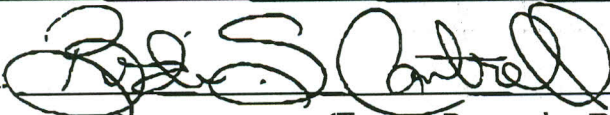
(1) Registration

(2) Meals

(3) Lodging (include name of hotel and cost per night) _____

(4) Mileage

(5) Other anticipated expenses such as parking (specify) _____

Signed: 
(Teacher Requesting Trip)

Date: 3/7/11

Approved By: 
(Signature of Principal)

Date: 3/7/11

Approved By: 
(Signature of Assistant Director of Schools)

Date: 3-7-11

Approved By: _____
(Signature of Director of Schools)

Date: _____

Approved by Board (if necessary): _____

Remarks or Conditions: _____