

# Request for Field Trip

Teacher's Name Brandi S. Cantrell

School South Fulton High School

Destination (include address) 3121 High Point Road Greensboro, NC 27407

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) Beta Club

1. How is this trip an integral part of an approved course of study? This is the National Beta Conv.

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

a. Students will fix any items needed in the scrapbook.

b. Students will practice for the National Officer Skit.

c. \_\_\_\_\_

d. \_\_\_\_\_

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

a. Students will begin work on 2012-2013 projects.

b. \_\_\_\_\_

c. \_\_\_\_\_

d. \_\_\_\_\_

4. Transportation Requested: N/A Parents taking students to airport in Nashville; Flying to N. Carolina

5. Date of Trip: June 27-30

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

7. Parental Permission Forms Received: will be obtained prior to travel.

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

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):

Tammy Sisson, Lori Martin

10. What is the total number of students going on the trip? 21

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

12. What is the approximate cost of the trip per student? approximately \$250 per student

13. How are you funding the trip? fund-raising and club 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: \_\_\_\_\_ Date: \_\_\_\_\_

(Teacher Requesting Trip)

Approved By: *Keith Trigg* Date: 4/12/12

(Signature of Principal)

Approved By: *Paul Hillman* Date: 4-13-12

(Signature of Assistant Director of Schools)

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

(Signature of Director of Schools)

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

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