

Administrative Procedure

Request for Field Trip

Teacher's Name Tammy Sisson School South Fulton Middle

Destination (include address) Opryland Hotel Nashville, 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) 6th-8th Subject Area (secondary) _____

1. How is this trip an integral part of an approved course of study? We will be competing in various academic and arts competitions

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

- a. Preparing for academic competitions
- b. Preparing for arts & or crafts competitions
- c. working on banner and scrapbook
- d. _____

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

- a. If we win at the state level, then we
- b. will prepare for the National level
- c. _____
- d. _____

4. Transportation Requested: Bus with underneath storage

5. Date of Trip: Nov 18-20, 2012

6. Substitutes Requested (if necessary): 3

7. Parental Permission Forms Received: yes - will collect before we

8. Plans of Students Not Going On Trip: will be in class leave

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

Tammy Sisson, Brandi Cantrell, Chuck Seratt, Wade Seratt

10. What is the total number of students going on the trip? 35

11. How much regular classroom instructional time will be missed? 2 days

12. What is the approximate cost of the trip per student? \$125⁰⁰

13. How are you funding the trip? club funds & for fund raising

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: [Signature] Date: _____
(Teacher Requesting Trip)

Approved By: [Signature] Date: 8/22/12
(Signature of Principal)

Approved By: [Signature] Date: 8-22-12
(Signature of Assistant Director of Schools)

Approved By: [Signature] Date: 8/22/12
(Signature of Director of Schools)

Approved by Board (if necessary): _____

Remarks or Conditions: _____