

Administrative Procedure

Request for Field Trip**(Overnight)**

Teacher's Name

Barbara Orr

School

Hillcrest
(Science Club)

Destination (include address)

Brandon Spring Group Center

☐ 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)

4th, 5th, 6th

Subject Area (secondary)

1. How is this trip an integral part of an approved course of study? Brandon Springs

staff offers ten or more programs; each correlated to multiple Tennessee science standards. See attached.

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

a. studied ecosystems

b. studied adaptations

c. studied nutritional relationships of organisms

d. _____

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

a. activities at the Commons Building following

b. each program we ~~will~~ participate in.

c. During Science Club meetings, the students conduct

d. Chemistry experiments most of the time. This trip will allow Biology to be included.

4. Transportation Requested: yes - bus

5. Date of Trip: April 7-8, 2014

6. Substitutes Requested (if necessary): 2 - one each for Courtney & Barbie

7. Parental Permission Forms Received: 40

8. Plans of Students Not Going On Trip: Remain at school in class since only part of each grade will be going on the trip.

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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):

Barbie Orr Mindy Coursey
Courtney Gantt Lana Carson

10. What is the total number of students going on the trip? 40
11. How much regular classroom instructional time will be missed? 2 days
12. What is the approximate cost of the trip per student? \$0.00
13. How are you funding the trip? fund raisers
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: Barbara Orr Date: 9/23/13
(Teacher Requesting Trip)

Approved By: Patricia Rogers Date: 9/23/13
(Signature of Principal)

Approved By: Dul Hillwell Date: 9-23-2013
(Signature of Assistant Director of Schools)

Approved By: _____ Date: _____
(Signature of Director of Schools)

Approved by Board (if necessary): _____

Remarks or Conditions: _____