## Request for Field Trip

Teacher's Name Jeanne Foster  Destination (include address) All-West Tennessee Band in	
	Memphis, TN
Destination (include address) All-West Temessoo Band in	1 Vicing of the Object County
The request is for a field trip listed in the current board- School District's Field Trip Manual	
The request is for a field trip which is not listed in the County School District's Field Trip Manual	
Stade Bever (e.e.m.)	ct Area (secondary) Junior High Band
. How is this trip an integral part of an approved course	of study? This trip allows the band students
to be introduced to higer levels of music and musician	ship.
<ol> <li>Prior to this field trip the class will be involved in the f this trip:</li> <li>a. The band members were given music to audition of</li> </ol>	
b. The students auditioned on January 17, 2015 in ord	
c.	
d	
3. Follow-up activities for this unit will include the follow-	wing activities:
J. Ponow-up dedivities for the	
a. A concert will be given at the conclusion of the he	
A concert will be given at the conclusion of the he  b.	
<ul><li>a. A concert will be given at the conclusion of the hole.</li><li>b.</li><li>c.</li></ul>	
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<ul> <li>a. A concert will be given at the conclusion of the hole.</li> <li>b.</li> <li>c.</li> <li>d.</li> <li>4. Transportation Requested: 1 van</li> <li>5. Date of Trip: February 12-14, 2015</li> <li>6. Substitutes Requested (if necessary): 1 for a day and</li> </ul>	onor band weekend for public

## Administrative Procedure

How much regular classrom instructional time will be missed? 1 1/2 days  What is the approximate cost of the trip per student? No cost to the students  How are you funding the trip? The LRS band will pay bus, food, and registration cost  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: 11-35-14  (Teacher Requesting Trip)	Jeanne Foster			
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What is the total number of students going on which will be missed? 1 1/2 days  How much regular classrom instructional time will be missed? 1 1/2 days  What is the approximate cost of the trip per student? No cost to the students  How are you funding the trip? The LRS band will pay bus, food, and registration cost  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:  (5) Other anticipated expenses such as parking (specify)  Approved By:  (Signature of Principal)  Approved By:  (Signature of Assistant Director of Schools)  Date: 12/1/14  (Signature of Director of Schools)				
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Signed: Date: 11-25-14  Signed: Date: 11-25-14  Approved By: Signature of Principal)  Approved By: Signature of Assistant Director of Schools)  Approved By: Date: 12-14-14  (Signature of Director of Schools)  Date: 12-14-14				
Signed:  Oave Obline  Date: 11-2514  Creacher Requesting Trip)  Approved By:  (Signature of Principal)  Approved By:  (Signature of Assistant Director of Schools)  Approved By:  Oate: 12-14  (Signature of Director of Schools)  Date: 12-14	(3) Lodging (include nat	ne of hotel and cost per mig	(ht)	
Signed: Date: 11-25-14  Approved By: Skells State Date: 1/-25-/  (Signature of Principal)  Approved By: Signature of Assistant Director of Schools)  Approved By: Date: 12/1/14  (Signature of Director of Schools)  Date: 12/1/14				
Signed: Date: 11-25-14  Approved By: Skells State Date: 1/-25-/  (Signature of Principal)  Approved By: Signature of Assistant Director of Schools)  Approved By: Date: 12/1/14  (Signature of Director of Schools)  Date: 12/1/14	(4) Mileage			
Approved By:  Approved By:  (Signature of Principal)  Approved By:  (Signature of Assistant Director of Schools)  Approved By:  (Signature of Director of Schools)  Date: 12/1/14		penses such as parking (spe	cify)	
Approved By:  Approved By:  (Signature of Principal)  Approved By:  (Signature of Assistant Director of Schools)  Approved By:  (Signature of Director of Schools)  Date: 12/1/14		penses such as parking (spe	cify)	
Approved By:  (Signature of Principal)  (Signature of Assistant Director of Schools)  Approved By:  (Signature of Director of Schools)  Date: 12/1/19  (Signature of Director of Schools)	(5) Other anticipated exp	N. A.	ecify)	Date: _11-2514
Approved By:  (Signature of Principal)  (Signature of Principal)  Date: 12/1/4  (Signature of Assistant Director of Schools)  Date: 12/1/19  (Signature of Director of Schools)	(5) Other anticipated exp	ve Justin		Date: _11-2514
Approved By:  (Signature of Assistant Director of Schools)  Date: 12/4/19  (Signature of Director of Schools)  Diane  Director of Schools)	Signed:	(Teacher Requesting T		Date:
Approved By:  (Signature of Assistant Director of Schools)  Date: 12/4/19  (Signature of Director of Schools)  Diane  Director of Schools)	Signed:	(Teacher Requesting T	rip)	Date:
Approved By: Date: 12/4/19 (Signature of Director of Schools) Winne Derry	Signed: Other anticipated exp  Approved By: Skell	(Teacher Requesting T	rip)	Date: _ <i>_//- 25 -/</i>
	Signed: Qow Approved By: Approved By:	(Teacher Requesting T	rip)	Date: _ <i>_//- 25 -/</i>
	Signed: Qow Approved By: Approved By:	(Teacher Requesting To Assistant Directo	rip) al) r of Schools)	Date:
	Signed:	(Teacher Requesting To Assistant Directo	rip) al) r of Schools)	Date:
	Signed:	(Teacher Requesting To Assistant Directo	rip) al) r of Schools)	Date: