

Request for Field Trip

Teacher's Name Amanda Spicer

School Hillcrest

Destination (include address) St. Louis, MO See attached for destinations

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) 4-8

Subject Area (secondary) _____

1. How is this trip an integral part of an approved course of study? This is the PLUS class.

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

a. Activities for each attraction will be completed before the trip.

b. _____

c. _____

d. _____

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

a. Follow up activities will be done on the trip to see what was learned.

b. _____

c. _____

d. _____

4. Transportation Requested: Will be requested upon approval

5. Date of Trip: May 20-22

OVERNIGHT - NEEDS BOARD APPROVAL

6. Substitutes Requested (if necessary): 0

7. Parental Permission Forms Received: Will get closer to time.

8. Plans of Students Not Going On Trip: Trip is after summer dismissal

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):

Amanda Spicer, Teresa Cook

Some parents possibly going are OC staff- Michelle Buchanan, Lana Carson,

Shiloh/George Leake, and Melody Baker

10. What is the total number of students going on the trip? approximately 17

11. How much regular classroom instructional time will be missed? 0

12. What is the approximate cost of the trip per student? No child will be charged

13. How are you funding the trip? 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: Amanda Spicer Date: 1/16/16
(Teacher Requesting Trip)

Approved By: Patresa Rogers Date: 1/16/16
(Signature of Principal)

Approved By: Dal Hillwell Date: 1-25-16
(Signature of Assistant Director of Schools)

Approved By: [Signature] Date: 1/21/16
(Signature of Director of Schools)

Approved by Board (if necessary): _____

Remarks or Conditions: _____

Administrative Procedure

Request for Transportation

INSTRUCTIONS:

1. Complete all items in Part A and submit to your principal for his/her approval.
2. This form must be approved and forwarded to the transportation office by the principal at least two weeks preceding the date of the trip.
3. Time: Trips are to be planned, if at all possible, between the hours of 9:00 a.m. and 2:00 p.m. If a trip is to extend beyond these times, special arrangements will be needed. Special arrangements to be completed by the director of transportation and the principal.
4. Bus Conduct Rules and Regulations shall be enforced by the sponsor.
5. Approval of trips is subject to availability of busses.
6. No more than five(5) chaperones per bus.
7. Approved and scheduled requests will be returned to the building principal.

Part A:

Date Submitted: 26 Jan 16 School: Hillcrest
 Group or Activity Requesting Transportation: PLUS
 Sponsor: Amanda Spricer Charged or bill to: PLUS
 Trip Date: 5/20-22/16 # of Buses: 1 # of Students: ~17 # of Chaperones: at least 4
 Do You Need A Driver? Yes No If Not, Who Is Driving? Brandon Baldwin
 Specific Location of Loading Place: Front of School
 Times: Loading: 11:30 Leaving School: 11:45 Arrive First Destination: ~5:00
 Leave Last Destination: ~12:00 Return: ~5:00
 Destination: St Louis MO
 Physical Address: See attached

Trip Itinerary and Item(s) of Special Note should be included on the back of this form. Any stops between points must be approved by the principal.

Part B: (For administrative use - building level)

Request Approved Request Denied

Date of Approval/Denial 1/26/16

Building Principal Signature Patresa Rogers

Part C: (For transportation office)

Request Approved Request Denied

Type of Transportation: District Bus: _____ Chartered Bus: _____ Other: _____

Supervisor of Transportation Signature _____ Approximate Cost: _____