

FIELD TRIP REQUEST OVERNIGHT

SPONSOR MUST COMPLETE THIS FORM AND TURN IN TO THE CAMPUS PRINCIPAL FOR APPROVAL 90 DAYSPRIOR TO THE FIELD TRIP DATE.

Name: KrySt Kelley Date of form completion: 8-7-2018
Description of field trip: All 3 Students will be Competing in Agriscience Competition for middle school 5 tudents at the Natural level. Both tegms computed at the State FFA convention in June to quality them for this Natural competition. Date: October 23, 2018 (departure) Time: TBA
Date: October 27, 2018 (return) Time: TBA
Place Indianapolis, Indiana Total Time gone: 5 days
-Please attach your Hotel Security Plan to this request-
of Students # of Special Ed # of Staff
of Chaperones Travel Arrangements: Bus <u>ho</u> Plane: <u>4</u>
Estimated Cost: \$\frac{\sim 4000}{\text{000}}\$ # of days students will miss school: \frac{\days}{\days}\$ NOTE: Maximum 55 students and staff per bus. Some Special Ed may require a separate bus. \$40/hour - Minimum two hours. Add 30 minutes for travel time between campus and bus barn
Educational objectives to be met (list TEKS): Prin of Ag 130,2c2. c Participale in youth leadership opportunities to create a velle-rolinded experience program 130,2c5. D develop and demonstrate leadership a skells and collaborate with others to accomplish organizational goals + objectives
When your trip is approved, please notify the following people at least 10 school days prior to the trip.
Front Office Cafeteria Manager
Nurse P.E./Music Teacher
Signature of Sponsor Mary Suth for Krysti Kelley To be completed by Principal
Date: 8/1/18 Approved: XX
peried:
Signature of Principal or Designee:
Signature of Superintendent:

NOTE: All Chaperones or parents attending the field trip must have a completed background-check on file with the district.