NELSON COUNTY SCHOOLS
OVERNIGHT & OUT-OF-STATE ACTIVITY REQUEST

School Nelson County High School Grade & Number of Students Attending 25-30

Person Making Request Zach Allender Position Boys Basketball Coach.

Overnight Activity X Out-of-State Activity ____ Dates Scheduled ____

Name of Activity Boys Basketball Camp @ Morehead State.

Location of Activity Morehead State University

Objectives of Activity Team bonding & Summer Games.

Pre-trip preparatory activities planned (please attach appropriate documents) ____

Post-trip culminating activities planned (please attach apropriate documents) ____

Oral student presentations planned after trip ____

Name(s) of certified staff attending Reece Riley, Brian Sims, Stan Hayes
Two of the three will attend

Name(s) of other adults attending ____

Plan for supervision (day) Players are to be with a coach @ all times!
Players will always travel in groups & a coach

Plan for supervision (night - please be specific for all hours of the night) There will be a curfew & lights out time set in store for players to follow. Players will never be with out a coach!

Signed [signature] Date 5/21/18

Principal [signature] Date Approved 5/21/18

Superintendent [signature] Date Approved 5/25/2018

Field Trip Permission Form

NELSON COUNTY BOARD OF EDUCATION

General Information:

Teacher Name Zach Mundy School NCHS

Grade/Subject 9-12 Funding Source Boys Basketball Fund

Destination & Address 150 University Blvd Morehead, KY 40351 Date of Trip June 22-24, 2018

Academic Information:

Core Content +/or Exiting Criteria Covered _____

Academic Objective of Trip _____

Academic Pre-Trip Activities (Please attach plan.) _____

Academic Post-Trip Activities (Please attach plan.) _____

Evaluation Procedures _____

Transportation:

Number of Buses Needed 1 Time Leaving 6/22/18 11:00A Time Returning 6/24/18 Pick up @1:30 Home by 4:00p

Number of Students 25-30 Number of Adults 2 Compartments Needed _____

(CENTRAL OFFICE USE ONLY)

Date Called for Buses _____ Driver(s) Assigned _____

Itemized Cost: Bus Drivers $_____ Mileage $_____ Cost per Child $_____

Signatures:

Teacher — Date 5/21/18

Principal — Date 5/21/18

Superintendent/Director of Transportation — Date 5/25/2018

Review/Revised:3/20/07