STUDENTS

09.36 AP.21 (CONTINUED)

Field Trip Request Form- Overnight & Out-of-State Activity Request

School TWHS	Grade &	Number of Students Attending 3-1//13
Person Making Request	Pobinson	Position
Overnight Activity		Dates Scheduled 4-12-13
Name of Activity	Morehead St.	Jazz Festiva
Location of Activity	Monthead 5.	t.
Objectives of Activity_		
	· · · · · · · · · · · · · · · · · · ·	
Pre-trip preparatory activ	ì	ppropriate documents) Jazz
Post-trip culminating acti		appropriate documents) Pewo w
		· · · · · · · · · · · · · · · · · · ·
Oral student presentations planned after trip		
Name(s) of certified staff	attending <u>Shaw</u> 1	Rolinson
Name(s) of other adults at	tending Stephanie	Robinson
Plan for handling student r	nedication needs	N
Plan for supervision (day)	Band wi	11 travel together
Plan for supervision (night	-please be specific for all ho	ours of the night) <u>stwents</u> they yours c. 9:30
Signed		Date
Principal	Brudley	Date Approved
Superintendent		Date Approved
		Review/Revised:5/17/11
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- Needs to be approved by board.

- The trough time to separt in the trap.