Field Trip Request Form

This form is to be used by the staff when requesting permission to take a field trip. The completed form is to be submitted to the Superintendent one (1) week in advance of the next scheduled meeting of the Board. Complete pertinent information on next page.

Destination L	exington State Baseball	Tournament			
Date(s) of Trip _	6/3/14 - 6/7/14	Time of Departure	TBD	*Time of Return	TBD
Approximate Miles	age (one way)	85	Approximate Number of	f Students	25
Number of Buses	Required	1 Method of Transportation	on (if not school bus)		
Will you stop for it	unch? YES	NO If "YES", where?			
	TEACHER IS RESP	ONSIBLE FOR NOTIFYING CA	FETERIA OF DETA	ILED LUNCH PLA	<u>AN</u>
Number of Instruc		Justification: What is to be learned?			
How will the expe	rience be used and eval	uated?			
Names of chaper	ones (if applicable)	Don Pitts, Kevin Swift, Eric Sullivan, D	Oonnie Swift		
Have all chaper students?	rones undergone the	required records check and been of YES NO	designated by the pri	ncipal/designee to s	upervise
TRIP INFORMATION Mathed of Reserve					
	Financial Costs		Method of Payment		
	Mileage \$ Driver \$	\$974.00 \$300.00	Student Payment School Activity Acct	\$	
	Hotel \$	\$2,880.00	Athletic Boosters	\$	
	Admission \$	\$2,000.00	Band Boosters	\$4,880.00	
	Meais \$ TOTAL \$	\$6,154.00	EIS BOARD OF ED	\$1,274.00 \$6,154.00	
	TOTAL \$	40,104.00	TOTAL	\$0,134.00	
Requested by		Don Pitts		Date	11/21/13
Approved/Disapp	proved	Steve Smallwood	_, Principal	Date	11/21/13
Approved/Disapp	proved		_, Superintendent	Date	
	Principal appro	val for all field trips.			
	Superintendent	approval is required for all field trips over	er 65 miles one (1) way.		
	Board of Educa	ation approval is required for all overnigh	t field trips.		

*On school days, the return time should not exceed 2:00 p.m.