

Field Trip Permission Form

NELSON COUNTY BOARD OF EDUCATION

General Information:

Teacher Name Darrell Parks School NCHS
 Grade/Subject CTA / Drama Funding Source Students pay
 Destination & Address Derby Dinner Playhouse Date of Trip May 5, 16
525 Marriott Drive, Clarksville Indiana
47129

Academic Information: Legally Blonde The MusicalCore Content +/-or Exiting Criteria Covered Drama & Musical PerformanceAcademic Objective of Trip To see a professional Regional Theater performanceAcademic Pre-Trip Activities (Please attach plan.) Discuss rehearsal and performance techniquesAcademic Post-Trip Activities (Please attach plan.) Critique & discussionEvaluation Procedures Student discussion & critiques**Transportation:**

Number of Buses Needed 1 Time Leaving 4:45 Time Returning 10:45
 Number of Students 20 Number of Adults 5 Compartments Needed 0

(CENTRAL OFFICE USE ONLY)

Date Called for Buses _____ Driver(s) Assigned _____

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

Signatures:Darrell Parks

Teacher

1-28-15

Date

[Signature]

Principal

1-29

Date

[Signature]

Superintendent/Director of Transportation

12/1/2014

Date

Review/Revised:

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

School NCHS Grade & Number of Students Attending 9-12 20
Person Making Request Darrell Parks Position Drama Coach
Overnight Activity ☐ Out-of State Activity ☒ Dates Scheduled May 5, 2016
Name of Activity Derby Dinner Playhouse
Location of Activity 525 Marriott Dr. Clarksville IN 47129
Objectives of Activity To attend Legally Blonde the Musical
Pre-trip preparatory activities planned (please attach appropriate documents) See attached
Post-trip culminating activities planned (please attach appropriate documents) See attached
Oral student presentations planned after trip See attached
Name(s) of certified staff attending Darrell Parks, T.J Metcalf
Carrie Chawning
Name(s) of other adults attending Jeffrey Lutz, Leslie Lutz
Plan for handling student medication needs I am trained for medications, CPR etc.
Plan for supervision (day) will be with students the entire time
Plan for supervision (night - please be specific for all hours of the night) NOT overnight
Signed Darrell Parks Date 1-28-16
Principal [Signature] Date Approved 1-29
Superintendent _____ Date Approved _____

Review/Revised: 5/17/11

[Signature] 2/1/2016