

**Field Trip Request Forms****NELSON COUNTY BOARD OF EDUCATION****FIELD TRIP REQUEST FORM****General Information:**

*Melanie Hill, Wanda Brooks*  
 Teacher Name Jennifer Morley, Kristi Morris School Bloomfield Elementary  
 Grade/Subject 1st / Reading Funding Source Students/PVG  
 Destination & Address Derby Dinner Playhouse Date of Trip 10-18-16  
525 Marriot Dr. Clarksville IN 47129

**Academic Information:**

See Attached

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 2 Time Leaving 8:30 Time Returning 2:30

Number of Students 97 Number of Adults 60 Compartments Needed 0

(CENTRAL OFFICE USE ONLY)

Date Called for Buses \_\_\_\_\_ Driver(s) Assigned \_\_\_\_\_

Date School Notified \_\_\_\_\_

Itemized Cost: Bus Drivers \$ 114.00 Mileage \$ 138.00 Cost per Child \$ 15.60

**Signatures:**

*Wanda Brooks*  
*Kristi Morris*  
*Jennifer Morley*  
 Teacher \_\_\_\_\_  
 Principal \_\_\_\_\_

8-22-16

Date

Date

*Chris Marie Wilkins*  
 Superintendent/Director of Transportation

Date

STUDENTS

09.36 AP.21  
(CONTINUED)

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

School Bloomfield Elementary Grade & Number of Students Attending Kindergarten=41  
Person Making Request Jennifer Morley, Kristi Morris, Melanie Hill, Wanda Brooks Position Teacher first = 56  
Overnight Activity ☐ Out-of-State Activity ☒ Dates Scheduled 8-10-18-14  
Name of Activity Field Trip to Derby Dinner Playhouse  
Location of Activity 525 Marriot Dr. Clarksville Indiana 47129  
Objectives of Activity See Attached

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

Post-trip culminating activities planned (please attach appropriate documents) \_\_\_\_\_

Oral student presentations planned after trip \_\_\_\_\_

Name(s) of certified staff attending Jennifer Morley, Kristi Morris, Melanie Hill, Wanda Brooks

Name(s) of other adults attending Vicky Tingle, Lisa Green

Plan for handling student medication needs All certified trained in handling medication.

Plan for supervision (day) Whole group setting / multiple chaperones

Plan for supervision (night – please be specific for all hours of the night) \_\_\_\_\_

Signed Jennifer R Morley, Melanie Hill, Wanda Brooks Date 8-22-14

Principal \_\_\_\_\_ Date Approved \_\_\_\_\_

Superintendent \_\_\_\_\_ Date Approved \_\_\_\_\_

Review/Revised: 5/17/11