Field Trip Permission Form

NELSON COUNTY BOARD OF EDUCATION

General Information:

Teacher Name Rayner / Cundiff School Fleming Field Elem.

Grade/Subject 2 Funding Source

Destination & Address Derby Dinner Playhouse 525 Marriott Drive Clarksville, IN 47129 Date of Trip Nov. 29, 2016

Academic Information:

Core Content +/or Exiting Criteria Covered RL2.1: Answer 5Ws + H. RL2.2: Determine central theme; RL2.7: Integrate/evaluate content presented in diverse formats

Academic Objective of Trip Experience literature alive, complete post-trip writing activity.

Academic Pre-Trip Activities (Please attach plan.) Discuss known story + answer 5Ws + H questions.

Academic Post-Trip Activities (Please attach plan.) Complete writing activity (poster) of main character which provides details of who, what, where, when, why, how

Evaluation Procedures Scoring guide

Transportation:

Number of Buses Needed 1 Time Leaving 8:30 Time Returning 2:30

Number of Students 46 Number of Adults 4 Compartments Needed

(CENTRAL OFFICE USE ONLY)

Date Called for Buses Driver(s) Assigned

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

Signatures:

Teacher	Principal	Superintendent/Director of Transportation
8/26/16		
Date	Date	Date

Susie Rayner

Ann Marie Wilhoit

Review/Revised:

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

School Bloomfield Elementary Grade & Number of Students Attending 2nd / 46

Person Making Request Susie Rapier, Amy Cundiff Position teacher

Overnight Activity ☐ Out-of State Activity ☑ Dates Scheduled Thes. Nov. 29, 2016

Name of Activity Once Upon A Snowflake (play)

Location of Activity Derby Dinner Playhouse / Clarksville, IN

Objectives of Activity RL.2.1 Answer 5W's +H questions, RL 2.2 Determine central message/theme RL 2.7 Integrate/evaluate content in diverse formats Experience live literature

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, can present orally

Name(s) of certified staff attending Amy Cundiff, Susie Rapier, Rachel Scholes, Donna Cammack (classified)

Name(s) of other adults attending various adults (not yet sent home note - estimate 10 Parents/guardians per class 10@2 = 20)

Plan for handling student medication needs medication will be kept by teacher and given at regularly scheduled time

Plan for supervision (day) Teachers will supervise with parents/guardians watching small groups of 2-3.

Plan for supervision (night – please be specific for all hours of the night) Not Applicable

Signed A Cundiff / Susie Rapier Date 8/29/16

Principal Stephanie Sapp Date Approved 8/29/16

Superintendent _____ Date Approved _____

Review/Revised: 5/17/11