NELSON COUNTY SCHOOLS
OVERNIGHT & OUT-OF-STATE ACTIVITY REQUEST

School NCHS Grade & Number of Students Attending 30

Person Making Request Makenzie Thomas - Mike Glass Position Ag Teachers

Overnight Activity X Out-of-State Activity _____ Dates Scheduled Dec. 2-3

Name of Activity FFA Freshmen Leadership conference

Location of Activity KY Leadership Training Center Hardinsburg, KY

Objectives of Activity develop leadership skills in freshmen members.

Pre-trip preparatory activities planned (please attach appropriate documents) All activities will be planned

Post-trip culminating activities planned (please attach apropriate documents) FFA Meeting presentations

Oral student presentations planned after trip Presentations will be done during FLC.

Name(s) of certified staff attending Makenzie Thomas & Mike Glass

Name(s) of other adults attending TBD

Plan for supervision (day) NA Group facilitators will monitor students.

Plan for supervision (night - please be specific for all hours of the night) Girls in one cabin, boys in another. Mr. Glass & Mrs. Thomas will stay in cabins with them.

Signed Makenzie Thomas Date 09/08/16

Principal _____ Date Approved 9-9

Superintendent _____ Date Approved _____

Kimberly Brown 9/12/2016

Field Trip Permission Form

NELSON COUNTY BOARD OF EDUCATION

overnight?

General Information:

Teacher Name Makenzie Thomas School NCHS

Grade/Subject 9-12 Ag Funding Source FFA

Destination & Address KY Leadership Training center Date of Trip NOV 2016 DEC 1-3

Academic Information:

Core Content +/or Exiting Criteria Covered EF1, EF2, EF3

Academic Objective of Trip Develop leadership skills in our freshmen members.

Academic Pre-Trip Activities (Please attach plan.) executive team will meet to develop an agenda and workshops.

Academic Post-Trip Activities (Please attach plan.) a debrief and reflection assignment given.

Evaluation Procedures satisfaction survey - many formative assessments along the way.

Transportation:

Number of Buses Needed 1 Time Leaving 3:30pm Time Returning Sat by 2pm

Number of Students 30 Number of Adults 2 Compartments Needed +

(CENTRAL OFFICE USE ONLY)

Date Called for Buses _____ Driver(s) Assigned _____

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

Signatures:

Makenzie Thomas
Teacher
09/08/16
Date

Principal
9-12
Date

Superintendent/Director of Transportation
9/20/2016
Date

Review/Revised:3/20/07