

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

School BMS/BES Grade & Number of Students Attending 4th-8th 90

Person Making Request Mitzi Avritt Position Beta Sponsor

Overnight Activity Out-of State Activity Dates Scheduled June 14-18, 2019

Name of Activity National Beta Convention

Location of Activity Oklahoma City, Oklahoma

Objectives of Activity see attachment

Pre-trip preparatory activities planned (please attach appropriate documents) see attachment

Post-trip culminating activities planned (please attach appropriate documents) see attachment

Oral student presentations planned after trip: Trip takes place during the summer months. Betas may share experiences with peers the next

Name(s) of certified staff attending Mitzi Avritt, Jenny Kidwell School year: _____

Name(s) of other adults attending Students are traveling with parents or a friend their parent has designated to be their caretaker

Plan for handling student medication needs students are traveling with family members

Plan for supervision (day) Students will be in group activities or with their family

Plan for supervision (night - please be specific for all hours of the night) students will be with family

Signed Mitzi Avritt Date 2-8-19

Principal Rod Meyer Stephan S Date Approved 2/8/19

Superintendent _____ Date Approved _____

Review/Revised: 5/17/11

2-15-19

STUDENTS

09.36 AP.21

Field Trip Request and Permission Forms

NELSON COUNTY BOARD OF EDUCATION

FIELD TRIP PERMISSION FORM

General Information:

Teacher Name Mitch Auer School BES/BME

Grade/Subject 4th-5th Funding Source Personal / Bata

Destination & Address National Bata Oklahoma City, OK Date of Trip June 14-18, 2019

Academic Information:

Core Content +/-or Exiting Criteria Covered see attachment

Academic Objective of Trip see attachment

Academic Pre-Trip Activities (Please attach plan.) see attachment

Academic Post-Trip Activities (Please attach plan.) see attachment

Evaluation Procedures Students will be awarded during the closing ceremony if they have placed in their area of competition
parental transportation

Transportation:

Number of Buses Needed _____ Time Leaving _____ Time Returning _____

Number of Students _____ Number of Adults _____ Compartments Needed _____

(CENTRAL OFFICE USE ONLY)

Date Called for Buses _____ Driver(s) Assigned _____

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

Signatures:

Mitch Auer _____
Teacher _____
2-8-2019 _____
Date _____

Rodriguez _____
Principal _____
2/8/19 _____
Date _____

Superintendent/Director of Transportation _____

Date _____