

School-Related Student Trip Proposal Form
SIMPSON COUNTY SCHOOLS

Teachers/Activity Sponsors: Requests should be made to the Principal at least 2 weeks prior to the trip.

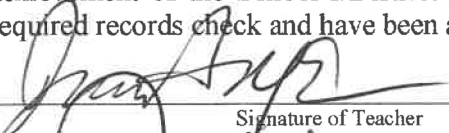

Staff Name: <u>Jonathan Beard</u>	Submission Date: <u>5/7/24</u>
School: <u>Franklin-Simpson MS</u>	Grade/Class/Group: <u>6th-8th</u>

Name of Event/Activity: <u>National BetaCon</u>	Location: <u>Savannah, GA</u>
Date of Event/Activity: <u>June 9-13, '24</u>	Departure Time: _____ Return Time: _____
Description of Event/Activity (include educational purpose): <u>Betas who have qualified from State Con. and Leadership Summits will join to compete for a national title.</u>	

# of Students: <u>45</u>	# of Adults: <u>4</u>
Fees (Note: Parents may see a higher fee due to an administrative fee that may be added. Your school bookkeeper and Principal will determine the final costs of all trips.)	
Fee per Student: <u>\$300 - \$500</u>	Fee per Adults: <u>\$300 - \$500</u>
Fee to be paid by (check all that apply):	School: <input type="checkbox"/> Student/Adults: <input checked="" type="checkbox"/>
Transportation (check all that apply): Bus: <input checked="" type="checkbox"/> Walk: <input type="checkbox"/> Other: <input type="checkbox"/> (Please specify): <u>(charter)</u>	
Meals (check all that apply): None: <input type="checkbox"/> Provided by School: <input checked="" type="checkbox"/> Provided by Parent: <input checked="" type="checkbox"/> Other: <input type="checkbox"/> (specify service and location):	

Posting Date (parents will see item online this date):	<u>3/01/24</u>
Purchase Deadline (date until trip will be available online):	<u>5/15/24</u>
Revenue Coding/Deposit Category:	

This field trip is part of the instructional program and will contribute significantly to the achievement of the School's/District's instructional goals. All chaperones have undergone the required records check and have been approved by the Principal/designee to supervise students.

 Signature of Teacher	<u>5/7/24</u> Date
 Signature of Principal	<u>5/9/24</u> Date
_____ Approved by Superintendent	_____ Date

Return form to school bookkeeper.