

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.


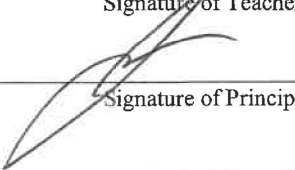
Staff Name: <i>Aaron Talley</i>	Submission Date: <i>8/14/2024</i>
School: <i>FSTH</i>	Grade/Class/Group: <i>FSTH Advanced Choir</i>

Name of Event/Activity: <i>FSTH to NYC</i>	Location: <i>NYC</i>	
Date of Event/Activity: <i>Aug 7-10, 2025</i>	Departure Time: <i>9:00 AM</i>	Return Time: <i>5:00 PM</i>
Description of Event/Activity (include educational purpose): <i>Travel to NYC for sightseeing, Broadway show, perform in church</i>		

# of Students: <i>Estimated 15</i>	# of Adults: <i>10</i>
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: <i>\$800 - finalizing prices</i>	Fee per Adults: <i>\$800 - finalizing prices</i>
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 type="checkbox"/> Walk: <input type="checkbox"/> Other: <input checked="" type="checkbox"/> (Please specify): <i>American Airlines / Local Transport</i>	
Meals (check all that apply): None: <input type="checkbox"/> Provided by School: <input type="checkbox"/> Provided by Parent: <input type="checkbox"/> Other: <input checked="" type="checkbox"/> (specify service and location):	

Posting Date (parents will see item online this date):	<i>8/19/2024</i>
Purchase Deadline (date until trip will be available online):	
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	<i>8/14/2024</i> _____ Date
 _____ Signature of Principal	<i>8/14/24</i> _____ Date
_____ Approved by Superintendent	_____ Date

Return form to school bookkeeper.