



FIELD TRIPS, EXCURSIONS AND OTHER STUDENT TRIPS

Students are to submit permission slips signed by parent(s)/guardian(s) prior to going on the scheduled trip and must be
appropriately dressed. A teacher(s) and/or other qualified individual(s) must accompany every group.
NOTE: A detailed itinerary is to be submitted with this form. Including a breakdown of total anticipated costs; showing itemized expenses (transportation, ticket prices, etc.) and method(s) of payment.
Teacher(s) Making Request: Vonne Okeefe/Shavne King Grade Level: 10-12 Request Date: 9/23/2024
Date(s) of Proposed Trip: January 7-8th Event Name: DECA District #I Conference
Phone number(s) for 24 hour contact in case of FMERGENCY: Destination Marriott Boston Quincy
Address: Quincy, MA 02169
NOTE: If this is an OVERNIGHT or OUT-OF-STATE field trip, has the Plymouth School
Committee approved it within the last 3 years? YES NO West Approval Defe
If YES, indicate the date of School Committee approval:
IF THERE IS A CONTRACT INVOLVED WITH THE TRIP, IT MUST BE REVIEWED BY THE BUSINESS ADMINISTRATOR.
Relevance of the "proposed" field trip - (Please attach a detailed response to the following 3 questions):
1.0 How does this proposed field trip focus on helping students acquire the knowledge and skills described in the Common Core of
Learning established by the Board of Education? 2.0 How the proposed field trip is integrated into the curriculum, or are content materials reflective of one of the core subject areas as
described in the Common Core of Learning established by the Board of Education?
3.0 How does the proposed field trip have learning outcomes consistent with the knowledge and skills described in the Common Core of
Education Follow-Up own prepand what results could have looked like had they done things
by ALL Students:
(1) 1-1-1-11111
Provisions for Students Lesson plan previoled to I student online work (assert lassroom) and the NOT Participating: student will be working in the school stere handling some inventory of ECCA's closet
1
Number of students Number of students Number of students who are participating: Do any students require medication?* YES NO
*If any student requires medication,
*If any student requires medication, state the provisions for attending to
their medical needs: epipens are handled by Students
Cost/Student: #175 - Cost/Teacher: \$280 - Cost/Chaperone: #280 - District Cost: \$1400 -
Type of Transportation: Bus Adult/Chaperone: Wenne Okede Shaine Hing, + 3 TBD
Departure Time/Place: 7:10 /g from DS/HS Return Date/Time: 1/8 @ 1:30
RECOMMENDATIONS:
Dept. Head: Disapproved Date: 9/30/79
Principal: Approved Disapproved Date: 9/30/L
Business Administrator Contract - YES Contract - NO Date:
Superintendent: Approved Disapproved Date: Date:
If there is not contract required, you MUST write "NO CONTRACT" in place of signature.