

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. Grade Level: 9-12 Request Date: 8/30/22 Teacher(s) Making Request: **Brenna Buckley Event Name: MASC Annual Conference** 3/8-3/10, 2023 Date(s) of Proposed Trip: Phone number(s) for 24 hour contact in case of EMERGENCY: Destination Brenna Buckley cell 512-217-8271 Address: 35 Scudder Ave, Hyannis, MA NOTE: If this is an OVERNIGHT or OUT-OF-STATE field trip, has the Plymouth School NO Committee approved it within the last 3 years? If YES, indicate the date of School Committee approval: 205-0 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): 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? How does the proposed field trip have learning outcomes consistent with the knowledge and skills described in the Common Core of Learning established by the Board of Education? **Education Follow-Up** Student Council members will attend workshops on teamwork, communication, event by ALL Students: planning, organization and spirit. All learning acquired will be brought back to PSHS with the goal of improving the overall school climate. **Provisions for Students NOT** Participating: **Number of students Number of students** Do any students NO X 12-16 YFS **NOT** participating: who are participating: require medication?* *If any student requires medication, state the provisions for attending to their medical needs: MASC provides an on-site nurse for the entire conference. Cost/Chaperone: |\$340 Cost/Student: \$340 Cost/Teacher: **District Cost:** Type of Transportation: Adult/Chaperone: Brenna Buckley bus Departure Time/Place: 8:00am 3/8 from PSHS Return Date/Time: noon 3/10 RECOMMENDATIONS: Dept. Head: **Approved** Disapproved Patty Fry Principal: Approved Disapproved **Business Administrator Contract - YES** Contract - NO Date: Superintendent: Stacev A. Rogers Approved Disapproved If there is not contract required, you MUST write "NO CONTRACT" in place of signature. COMMENTS: