

# SOUTH GIBSON SCHOOL CORPORATION

1

## OVERNIGHT TRIP APPLICATION FORM

National FFA Convention

### A. SPONSOR(S) SECTION (Use "NA" for questions not applicable)

A-1. Sponsor(s) Mr. Ritter

A-2. Group(s) attending: FFA

A-3. Date you filed this application: 8-16-2011

A-4. Date of departure: 10-11-2011 Date of return: 10-22-2011

A-5. Total number of school days to be absent: 2

A-6. What is the educational purpose of this trip?

To see the convention, hear guest speakers, attend ag career show.

A-7. WHY is this trip necessary? Awarded; Selected; Invited; Competition; Other; And explain?

Officers and active members are selected to attend.

A-8. Approximate total of students attending: 12

A-9. Estimated numbers in each grade attending: K 1 1 2 2 3  
4 4 5 5 6 6 7 7 8 8 9 9 10 3 11 4 12 5

A-10. Approximate number of chaperones supervising: 1

A-11. Name of person(s) having Single Point Accountability (SPA) for all the "Consent for Medical Treatment Forms" of students, sponsors, and chaperones. **Note: A duplicate set of medical forms must be delivered to the Central Office at or before departure.**

Richard Ritter

A-12. What mode of transportation are you using to get to your destination?

Minibus

A-13. Which particular funds (accounts) and fundraisers are being used to fund this trip? Fund name FFA

Fundraisers All

A-14. Estimate or range the total cost of the trip \$ 2000

Estimate or range the total cost to each student \$ 50.00

Estimate or range the total cost to each chaperone \$ 50.00

A-15. Are students and chaperones using any personal money for transportation and tickets for this trip? Yes    or No X. If Yes answer the following.

Approximate or range of cost to the student \$                     

Approximate or range of cost to the chaperone \$

**SOUTH GIBSON SCHOOL CORPORATION**  
**OVERNIGHT TRIP APPLICATION FORM**

2

- A-16. **ATTACH AND SUBMIT** A complete itinerary shall be attached to this form listing all events and times along with hotel names and methods of supervision. Be as complete as possible.
- A-17. **ATTACH AND SUBMIT** The transportation company phone number, fax number, a copy of their liability insurance certificate (limits of liability), and any other pertinent information related to the experience and integrity of this company.
- A-18. **AT DEPARTURE, SUBMIT AN ACCURATE LIST OF ALL STUDENTS AND CHAPERONES ALONG WITH MAJOR CHANGES TO THE ITINERARY TO THE AFFECTED PRINCIPAL.** Break down the list of chaperones into teachers, parents, college students, and other helpers. **The principal will fax to the Central Office the exact list of the group departing along with the updated itinerary.**
- A-19. **REMINDER:** It is mandatory to fill out and return page number #4 of this form to the affected principal within one week upon returning unless extra time is needed and granted by the affected principal.
- A-20 **NOTICE:** If dates or places should change after this trip is approved, this entire form must be resubmitted with changes for approval by the board.

**SOUTH GIBSON SCHOOL CORPORATION**  
**OVERNIGHT TRIP APPLICATION FORM**

3

**GROUP(S) ATTENDING** FFA - Nat. Conv. **SPONSOR** Mr. Ritter

**B. PRINCIPAL SECTION:**

**B-1.** Date form received: 8-16-2011

**B-2.** Have all affected teachers of participating students been notified and student requirements for makeup work been approved. Yes ☐ No ☒ This will be done leading up to trip.

**B-3.** In comments section record any previous trip concerns with an affected individual, group, or sponsor.

**B-4.** Are substitute teachers available for affected classes? Yes ☒ No ☐.  
If Yes, fill in the necessary information.

Sub name and class: \_\_\_\_\_  
Sub name and class: \_\_\_\_\_  
Sub name and class: \_\_\_\_\_  
Sub name and class: \_\_\_\_\_

**B-5.** Sam Reil 8/16/2011  
Approved by: Name and Date Denied by: Name and date

**B-6.** Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. SUPERINTENDENT SECTION:**

**C-1.** Date form received: \_\_\_\_\_

**C-2.** \_\_\_\_\_  
Approved by: Name and Date Denied by: Name and Date

**C-3.** Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SOUTH GIBSON SCHOOL CORPORATION**  
**OVERNIGHT TRIP APPLICATION FORM**

4

**GROUP(S) ATTENDING** \_\_\_\_\_

**SPONSOR** \_\_\_\_\_

**A. AFTER RETURNING FROM YOUR TRIP SPONSOR FILLS OUT THIS SECTION:**

**A-21.** Explain any problems with sickness, injuries, or discipline during this trip.

---

---

---

---

---

---

---

---

---

---

**A-22.** Explain any vandalism or theft of school property during this trip.

---

---

---

---

---

---

---

---

---

---

**A-23.** Recommendation of this trip or needed changes to this form (other info):

---

---

---

---

---

---

---

---

---

---

Sponsor's signature: \_\_\_\_\_

Date returned from trip: \_\_\_\_\_

Date of filing this page #4: \_\_\_\_\_

Principal's signature \_\_\_\_\_ Date \_\_\_\_\_

Superintendent's signature \_\_\_\_\_ Date \_\_\_\_\_

**REMINDER:** Fax copies of this page #4 back to the principal and sponsor.

## National FFA Convention Itinerary

Wednesday, October 19, 2011

3:30 pm        depart from Gibson Southern

8:00            check in to hotel

Thursday, October 20

8:00 am        attend convention opening session

10:00-2:00    agriculture careers show

2:00            leadership workshops

4:00            dinner

6:00            evening convention session

Friday, October 21

8:00am        fifth convention session

10:00-11-30   agriculture careers show

12:30—4:30   volunteer with day of service activities

6:00            evening convention session

Saturday, October 22

8:00            sixth convention session

12:00          depart for home

