

Arlington Public Schools
“Providing the means to accomplish dreams”

Supportive Information Sheet

**Subject: OVERNIGHT TRIP REQUEST FOR FFA
 HORTICULTURE TO ATTEND COMPETITION IN
 EPHRATA, WA, FEBRUARY 27-28, 2009.**

Action

Page(s): _____ Three (3), including cover _____

Submitted by: _____ Brett Sarver, CTE Director, Arlington School District _____

Date: _____ February 23, 2009 _____

Background Information:

Students have been competing throughout the year, preparing for the State contest. The Nursery Contest will be at Ephrata High School on Friday night; the Floriculture Contest will be hosted at Warden High School. We will be staying at the Moses Lake Holiday Inn Express, and traveling with Stanwood and Cedarcrest High Schools.

Administrative Consideration:

The substitute, registration, and hotel costs for Tracy Brown will be paid out of the CTE budget. Fundraising opportunities will be provided throughout the year to cover student costs.

Superintendent’s Recommendation:

That the Board approves the overnight trip request for FFA Horticulture students to travel to Ephrata, WA, February 27 – 28, 2009.

ARLINGTON SCHOOL DISTRICT NO. 16
315 N. FRENCH
ARLINGTON, WA 98223

OUT-OF-STATE OR OVER-NIGHT FIELD TRIP REQUEST FORM

Board Policy #2320 requires that field trips which take students out of the state or are planned to keep students out of the District overnight must be approved in advance by the Board.

Please complete this form and submit it to the Administration Office prior to the regularly scheduled board meeting so that this information can be included in the board packet for review before the scheduled meeting time.

The employee who is submitting this form is required to attend the Board meeting to answer any questions which might be raised by a Board member.

Name Tracy Brown

Building Arlington High School

Date(s) of proposed out of state or over-night travel: February 27-28, 2009

The purpose for this travel request is: Nursery Landscape and Floriculture CDE
At Warden and Ephrata High Schools

The number of people who will comprise the group is: 5

The estimated cost of the trip will be \$822; and, the source of the funding for the trip is from horticulture account 4503

I have made arrangements with my immediate supervisor for coverage at my work site while I am not at work. _____*(please initial)*

I am willing to share information with my colleagues that I have gained from this travel experience in the following manner:

Employee Signature

Date

Immediate Supervisor Signature

Date

Out of state or over-night travel was approved denied

by the Board of Directors on: _____

**Please see the back for additional mandatory detail*

OUT OF STATE OR OVER-NIGHT TRAVEL REQUEST FORM

ADDITIONAL COMMENTS

*Please include the following information in the estimated cost for your proposed travel if applicable:

a) substitute costs, if necessary,
1 day substitute for Tracy Brown= \$160

b) mileage costs -
Bus with Stanwood and Cedarcrest
\$.86/mile * approx 600 miles / by 3= approximately \$172
\$20/hour for the driver * approx 24 hours / by 3= approximately \$ 160

c) registration costs -
none

d) incidental costs related to this travel -
hotel- \$110 per room, 3 rooms=\$330 plus tax
2 students per room
1 room for Tracy Brown

$\$160 + \$172 + \$160 + \$330 = \$822.00$