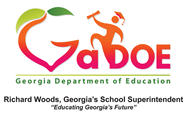
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**Nita M. Lowey 21st Century Community Learning Centers**

**Field Trip Proposal Form**

**Name of Grantee:** type the name of the grantee here

**Name of Subgrantee/Program:** ­­­type the name of the program here

**Person completing form:** type name here **Date:**

Complete and submit to ERES for prior approval if requesting 21st CCLC reimbursement. Do not complete if there are no costs or if using other funding sources. ERES will submit to FA for funding approval.

Form and supporting documentation must be submitted at least two weeks prior to date of requested event.

The field trip must have the ability to change grades, bring college/career awareness, support the program goals and objectives as listed in the grant application and have a positive impact on student growth and achievement. They should be connected to the academic or enrichment program and provide an educational experience from which students can grow academically. Field trips for entertainment purposes are not allowable.

If the field trip requires advance purchase of tickets, please note that the GaDOE will only reimburse up to 110% of the actual attendance cost and not necessarily the full cost of pre-purchased tickets for field trips.

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Goal:** List (write out) the goal(s) from the **grant application** associated with this field trip: | | | | | | | | | | |
|  | | | | | | | | | | |
| **Objective:** List (write out) the objective(s) from the **grant application** associated with this field trip: | | | | | | | | | | |
|  | | | | | | | | | | |
| **Description of field trip:** | | | | | | | | | | |
| **Date:** | **Time:** | | | | **Contact Hours:** | | | | | |
|  |  | | | |  | | | | | |
| **Location: Name and address of field trip activity.** | | **Distance: Number of miles round trip.** | | | | **Type of Transportation** | | | | |
|  | |  | | | |  | | | | |
| **Field trip destination/title/topic (include website link):** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Use the following spaces to provide a description of the field trip purpose as well as a description of the teaching that will occur prior to, during, and after the field trip to make it contextually relevant to student learning.**  **Attach pre-/post-activity worksheets, lesson plans or assessments.** | | | | | | | | | | |
| **Purpose:** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Pre-Activity(ies):** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Activity(ies) during the field trip:** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Post-Activity(ies):** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Attendees:** List the number of students and chaperones attending. (Suggested staff to student ratio - 1:10) | | | | | | | | | | |
|  | | | | | | | | | | |
| **Costs:** | | | **Qty. or #** | **Cost per item** | | | | **Total** | | |
| Students | | |  |  | | | |  | | |
| Chaperones | | |  |  | | | |  | | |
| Mileage Costs- # of miles (Qty) x cost per mile | | |  |  | | | |  | | |
| Bus Driver Costs(# of drivers x hourly rate x # of hours) | | |  |  | | | |  | | |
| **Grand Total** | | | | | | | |  | | |
| **Are there funds allocated for this field trip in the approved FY Budget?** | | | | | | **Yes** |  | | **No** |  |