

## Field Trip Request

Date Submitted 02/14/2020

Individual Submitting Request: Leigh Myers

Date of Field Trip: March 2<sup>nd</sup>, March 9<sup>th</sup>, March 16<sup>th</sup>, March 23<sup>rd</sup>, March 30<sup>th</sup>, April 13<sup>th</sup>, April 20<sup>th</sup>, and April 27<sup>th</sup>

Destination Name Reins Of Life

Destination Address:

1238 Silver Shoals Rd, Eastanollee, GA 30538

Destination Phone Number (706) 491-9764

Time of Departure 9:00 am

Return Time 11:45am

Method of Transportation: Franklin County School Bus (Peggy Samuels-Driver)

Special Transportation Request (wheelchair lift, etc.) none

Grades Participating: K-3rd

Number of Students 6

Number of Adults (List the adults below): \_\_\_\_\_

Student/Teacher Ratio 2:1

- Christy Black (Paraprofessional)
- Leigh Myers (Behavior Specialist/Admin)
- Tanisha Martin (Paraprofessional)

Are there points associated with this field trip? no

How many points: n/a

Educational Purpose:

Students will participate in equine therapy which places a focus on helping students learn pro-social skills such as accountability, responsibility, self-confidence, problem-solving skills, and self-control. Equine therapy also provides an innovative milieu in which the therapist and the student can identify and address a range of emotional and behavioral challenges.

What method will you utilize to measure the achievement of the education goal?

Students interactions with other peers and staff members at Reins of Life. Students will be prompted to engage in pro-social skills and they will receive verbal reminders about appropriate social skills including following directions, self-control, respect for self and others, and how to

show appropriate behaviors when in public settings, this will also be reflected on their daily point sheet.

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**Estimated Costs:**

Transportation:  
54 miles @ \$ 0 /mile = \$ 0  
Bus Driver:  
Peggy Samuels \$ 0  
Meals \$ 0  
Substitutes @ \$ 0 day \$ 0  
Admission Fees etc. \$ 0  
  
Other please specify:  
\_\_\_\_\_ \$ \_\_\_\_\_  
TOTAL \$ 0

**To be Paid Through:**

FUTURES Budget 0  
Site Fund 0  
Other please specify:

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**Building Level Approval:**

Site Coordinator: Approved 2-18-20 Denied: \_\_\_\_\_  
*[Signature]* Date Date

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**District Level Approval (if leaving campus):**

Director: Approved Stacey L. B... Denied: \_\_\_\_\_

Pending BOC approval.