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## MEMORANDUM

**TO:** Board of Directors  
**DATE:** October 1, 2019  
**FROM:** Jean Shumate  
**RE:** Stanwood High School FFA Horticulture  
**TYPE:** Action Required

The Stanwood High School FFA Horticulture Team (7 students) request permission to attend the FFA Horticulture Judging Career and Development Events (CDE), October 11 through October 12, 2019, at the Lind-Ritzville High School in Ritzville, Washington.

Upon the approval by the Board, 7 students would attend the overnight FFA Career and Development event. Fees have been subsidized by the Associated Student Body (ASB) FFA Horticulture.

**RECOMMENDATION:**

*That the Board approves the Stanwood High School FFA Horticulture Team Field Trip, October 11-12, 2019, to Ritzville, Washington.*

RECEIVED

2320 F2  
SEPT 30 2019  
Instruction



STANWOOD-CAMANO  
SCHOOL DISTRICT

**NON-LOCAL, OVERNIGHT & EXTENDED FIELD TRIP APPLICATION**  
**(To be completed by Teacher/Advisor)**

School Stanwood High School Today's Date 9/5/2019

Individuals/Group Involved FFA Floral Team Number of Students 7

Activity FFA Horticulture Judging CDE

Destination Lind-Ritzville High School

Departure Date 10/11/2019 Return Date 10/12/2019

Accommodations: Best Western Bronco Inn Ritzville

Source of Revenue: ASB FFA Horticulture

Fundraising Activities FFA Plant Sale

Individual Student Cost Only Dinner Total Group Cost \$600<sup>00</sup>

Insurance (special coverages) \_\_\_\_\_

Purpose of Trip (include educational value) FFA Floral CDE

Has this trip been previously taken? yes If yes, when? Last year - Spring 2019

**List of chaperones and students MUST be attached to this form.** (Chaperones must be of each gender if students of each gender are attending.)

- \_\_\_\_\_ 1. Additional information needed: \_\_\_\_\_
- \_\_\_\_\_ 2. Insurance coverage to be arranged through the insurance office.
- \_\_\_\_\_ 3. Parent permission and medical authorization forms go to principal.
- \_\_\_\_\_ 4. All district employees need to submit a travel request form.
- \_\_\_\_\_ 5. Notify school nurse.

\_\_\_\_\_  
Signature of Initiator

\_\_\_\_\_  
Signature of Building Principal

For Administration Use Only:

Board approval needed. Will be submitted on 10/1/19  
 Approved

Superintendent or Designee Signature

Date