Jimmy Carter National Historical Park

National Park Service

 

# Jimmy Carter National Historical Park Field Trip Reservations

**On-site field trips are offered with standards-based, grade specific, activities.**

**Reservations are required for guided educational programming.**

**Jimmy Carter Boyhood Farm**

**Recommended for Pre-K -12 grade**

Students participate in hands-on, cross-curricular activities as they learn about President Carter’s childhood, the influential people in his life, and farm life in the 1930’s.

**Time requirement**

A full farm tour with activities and a scheduled picnic lunch break will require a commitment of at least 3 hours. Shorter visits can be accommodated however, some activities will not be included due to time constraints.

**Plains High School Museum**

**Recommended for 2nd-12th Grade**

Students participate in interactive lessons and activities as they learn about his life as a child of the great depression, his accomplishments as president, and his journey to becoming a world-renowned humanitarian and champion for civil rights and peace!

**Time requirement**:

A full Plains High School tour will require a commitment of at least 2 hours depending on the group size. A visit to PHS can be planned in conjunction with a visit to the

Boyhood Farm upon request.

**Group size for all Field Trips**

Max 60 students (groups will be split into groups of 20 and then scheduled in rotations).

If your group/grade level is larger than 60 students, please plan to schedule multiple days for your school.

If accommodations cannot be made to schedule multiple days, please indicate on your registration form. We do not want this to detour your school from visiting our site.

**Schedule a Field Trip**

Complete the attached information and email to:

JICA\_Education@nps.gov

**Please provide desired dates on the attached form. Field trip reservations must be confirmed by education staff.** **The field trip coordinating teacher will be contacted by education staff via phone or email when reservation is confirmed to discuss program details, large group requests, and specific curriculum needs. A field trip planning guide with pre and post visit instructions and activities will be provided at that time.**

Additional resources and curriculum information can be found at:[**www.jimmycartereducation.org**](http://www.jimmycartereducation.org)

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**Field Trip Request Form**

**Please download document, complete, and email as an attachment to:** **JICA\_Education@nps.gov**

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| --- |
| Field Trip Coordinator/Teacher:  |
| School Name:  |
| School System (County):  |
| School Phone:  |
| Field Trip Coordinator/Teacher Cell Phone:  |
| Field Trip Coordinator/Teacher E-mail: |

|  |  |  |
| --- | --- | --- |
| Requested Date 1st choice | Requested Date 2nd choice | Requested Date 3rd choice |
|  |  |  |

|  |  |
| --- | --- |
| Grade Level |  |
| Number of Students |  |
| Number of Classes |  |
| Program(s) Requested*Please circle choice* | Boyhood FarmPlains High School |
| Arrival Time  |  |
| Departure Time |  |
| Picnic Lunch on Site | Yes | No |

**Participating Classroom Teachers**

|  |  |  |
| --- | --- | --- |
| Name | Email | Phone |
|  |  |  |
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**Jimmy Carter National Historical Park**

**Education Program**

**Travel Grant Application**

Travel Grants are to help cover school bus transportation costs. Commercial buses and private vehicles are not eligible for funding. Applications for travel grants must be submitted with field trip reservation for consideration. This funding is made possible through the generosity of donors to the Friends of Jimmy Carter National Historical Park.

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| **A. APPLICANT INFORMATION** |
| **NAME OF SCHOOL:** | **NAME OF TEACHER/CONTACT PERSON:** |
| **SCHOOL ADDRESS:** | **SCHOOL PHONE:** |
| **EMAIL OF CONTACT:** |
| **COUNTY:** | **SCHOOL FAX:** |
| **Field trip date:** |
| **Please specify the school name or organization (district transportation department) that the check should be written to. Checks cannot be made out to an individual.** |
| **Please specify name and address that the check should be sent to:** |
|  **B. BUDGET** |
| **Category** | Amount |
| **Number of Buses**Example: 2 |  |
| **Bus mileage**Example:138 miles @ 2.50/ $345.00 x 2 = $690 |  |
| **Bus driver salary**Example: $13 per hr. @ 10 hours/ $130.00x2= $260 |  |
| **TOTAL COST OF TRIP****$950** |  |
|  |
| **C. AUTHORIZED SIGNATURE** |
|  |

|  |  |
| --- | --- |
| ***For Official Use Only* Date Received:** | **Approved \_\_\_\_\_ Disapproved \_\_\_\_\_** |
| **Reviewed by: Date:** | **Justification:** |