

## Procedures for submitting a field trip application form:

1. Trip organizer completes Field Trip Application Form and submits to school nurse for review.
2. School nurse reviews all information and signs off on form.
3. Once signed by school nurse, trip organizer submits application with all necessary information to building principal for approval. Building principal approves or denies field trip proposal. If denied, notify trip organizer.
4. If approved, building AA enters proposed field trip on shared outlook calendar and sends proposal to district administration.
5. District administration receives trip proposal.
6. District administration approves or denies field trip proposal.
7. For local/in-state/one day trips District administration notifies the trip organizer of decision. Information is updated on shared field trip outlook calendar.
8. For out-of-state, out-of-country, or overnight field trips district administration submits field trip proposal to the full BOE for approval.
9. BOE approves or denies field trip proposal.
10. BOE notifies district administration of decision and District Administrative Assistant updates information on shared field trip outlook calendar.
11. Trip organizer receives cover sheet with decision noted.
12. Trip organizer notifies all necessary staff of approval or denial of field trip within one week of approval: (check and initial when complete) <input type="checkbox"/> Administration _____ <input type="checkbox"/> Nurse _____ <input type="checkbox"/> Cafeteria _____ <input type="checkbox"/> Other: _____

**\* Please note that field trips in September and June are highly discouraged.**

- Local/In-State/One day Field Trips must be submitted to the Superintendent/Designee at least 30 days prior to the date of the proposed field trip.
- Out-of-State/ Overnight/Out-of-Country Field Trips must be submitted to the BOE at least 60 days prior to the date of the proposed field trip.

### Steps to complete upon Final Approval of Field Trip:

1. Provisions for parent/guardian permission slips and student contracts and, where appropriate as a requirement, student contracts for behavior and learning expectations.
2. Notify cafeteria and nurses of the trip approval providing them with dates, time and # of passengers.
3. Supply grade level secretaries with a complete list of participants.
4. Have all permission slips and medications forms to the nurse at least 10 days prior to departure.
5. Designate staff to be in charge of medications and any other medical needs.
6. Make sure all volunteers meet BOE Policy 7025 and have had all necessary background checks as needed.
7. Alert now list, if trip is out-of-country, state or overnight are prepared and given to secretary and the building principal.
8. Inform staff and chaperones prior to leaving of their responsibilities while on the trip.

These steps are not an exhaustive list of the steps that you may have to complete in order to have a successful field trip, but they are the steps that must be completed based on BOE Policy 6088. If you have any questions or concerns regarding the process please consult with your building principal.

## COVER SHEET

**This cover sheet must accompany the Field Trip Application Form for all steps of approval and then be returned to the trip organizer upon completion of the proposal/approval process.**

- Local/In-State/One day Field Trips must be submitted to Central Office at least 30 days prior to the date of the proposed field trip.
- Out-of-State/Overnight/Out-of-Country Field Trips must be submitted to Central Office at least 60 days prior to the date of the proposed field trip.
- The steps for proposal and possible approval of all field trips must follow the below steps. Each step should be checked, signed and dated when complete.
- This form must be completed in its entirety. Incomplete forms will be returned to trip organizer. Section 9 must have all necessary signatures before district approval will be given.

**\* Please note that field trips in September and June are highly discouraged.**

	Task	Date and Signed
<input type="checkbox"/>	Trip organizer completes Field Trip Application Form and submits to school nurse for review.	
<input type="checkbox"/>	School nurse reviews all information and signs off on form.	
<input type="checkbox"/>	Once signed by school nurse, trip organizer submits application with all necessary information to building principal for approval. Building principal approves or denies field trip proposal. If denied, notify trip organizer.	
<input type="checkbox"/>	If approved, building AA enters proposed field trip on shared outlook calendar and sends proposal to district administration.	
<input type="checkbox"/>	District administration receives trip proposal.	
<input type="checkbox"/>	District administration approves or denies field trip proposal.	
<input type="checkbox"/>	For local/in-state/one day trips District administration notifies the trip organizer of decision. Information is updated on shared field trip outlook calendar.	
<input type="checkbox"/>	For out-of-state, out-of-country, or overnight field trips district administration submits field trip proposal to the full BOE for approval.	
<input type="checkbox"/>	BOE approves or denies field trip proposal.	
<input type="checkbox"/>	BOE notifies district administration of decision and District Administrative Assistant updates information on shared field trip outlook calendar.	
<input type="checkbox"/>	Trip organizer receives cover sheet with decision noted.	
<input type="checkbox"/>	Trip organizer notifies all necessary staff of approval or denial of field trip within one week of approval: (check and initial when complete) <input type="checkbox"/> Administration _____ <input type="checkbox"/> Nurse _____ <input type="checkbox"/> Cafeteria _____ <input type="checkbox"/> Other: _____	

**Central Office Final Decision:**

TRIP APPROVED

TRIP DENIED

**1. LOGISTICS**

Date of Application: \_\_\_\_\_ Person Proposing Field Trip: \_\_\_\_\_

Date(s) of Trip: \_\_\_\_\_ Departure Time: \_\_\_\_\_ Return Time: \_\_\_\_\_

Specific Destination: \_\_\_\_\_ (event/site and specific city, state)

(Must be submitted to Central Office at least 30 days prior to trip.)

In State One Day Trip

(Must be submitted to Central Office at least 60 days prior to trip. All trips will require BOE approval.)

Overnight In State Trip  One day out of State Trip  Multi-Day out of State Trip  Out of Country Trip

Transportation: \_\_\_\_\_ (be specific/company name/if walking the route)

**2. PARTICIPANTS**

Class(es)/Students that are participating: \_\_\_\_\_ (attach list of names)

Is this list subject to change? \_\_\_\_\_ If yes, explain: \_\_\_\_\_

**3. CHAPERONES**

(Please note the number of chaperones needed along with names)

\_\_\_\_\_ Teachers: \_\_\_\_\_

\_\_\_\_\_ Paras/Support Staff: \_\_\_\_\_

\_\_\_\_\_ Parents/Volunteers: \_\_\_\_\_

\_\_\_\_\_ Nurse: \_\_\_\_\_

Actual count or  Estimated Count

If an estimated count, explain: \_\_\_\_\_

**4. POSSIBLE COST OF TRIP TO DISTRICT**

How many teacher substitutes will be needed to cover students not going on the trip? \_\_\_\_\_

How many para substitutes will be needed to cover students not going on the trip? \_\_\_\_\_

Number of days above substitutes will be needed: Teachers: \_\_\_\_\_ Paras: \_\_\_\_\_ Nurse: \_\_\_\_\_

Cost of above substitutes for class coverage (@\$100/day): \_\_\_\_\_

**\*\*Funding source for cost of subs (i.e. included in student cost, student activity account, etc.):**

\_\_\_\_\_

The above number of substitutes is an  Actual or  Estimated count.

If an estimated count, explain: \_\_\_\_\_

If trip is outside of regularly scheduled school hours or on a weekend, will a custodian be needed for entry into the building?  Yes (Additional OT costs may apply)  No

**Possible additional costs (please check all that apply)**

special transportation  1:1 chaperone  food/meal  IEP mandates  chaperone background checks (overnight only)

other: (specify) \_\_\_\_\_

Explain all checked boxes as specifically as possible and how the additional costs will be funded:

\_\_\_\_\_

**5. TRIP COST PER PERSON**

Total cost of trip: \_\_\_\_\_ Explain the cost of the trip per person (admission, transportation, meals etc.): \_\_\_\_\_  
\_\_\_\_\_

**6. FUNDING SOURCE – How will the trip be paid for**

- |  |          |   |          |
|--|----------|---|----------|
| <input type="checkbox"/> Student               | \$ _____ | <input type="checkbox"/> District Budget        | \$ _____ |
| <input type="checkbox"/> Fundraising           | \$ _____ | <input type="checkbox"/> Grant <i>(specify)</i> | \$ _____ |
| <input type="checkbox"/> School Activity Funds | \$ _____ | <input type="checkbox"/> Other <i>(specify)</i> | \$ _____ |
| <input type="checkbox"/> PTO                   | \$ _____ |   |          |

How much of the total cost will each student be expected to pay? \$ \_\_\_\_\_

Will financial assistance be provided for those in need?  Yes  No Funding Source: \_\_\_\_\_

**7. EDUCATIONAL PURPOSE**

**Educational Objective and Assessment Strategy:** *(attach additional pages as necessary)*

**8. ALTERNATE ACTIVITY**

**Description of what class(es)/Students not going on the trip will be doing during the trip:**

**9. SIGNATURES**

**Nurse:** \_\_\_\_\_ (Signature indicates the nurse will be able to process all paperwork prior to date of field trip.)

**Glucagon accommodations may be needed**  **Yes**  **No** **Nurse required to attend field trip?**  **Yes**  **No**

**Designated person responsible for medication Administration on the trip:** \_\_\_\_\_

**Principal:** \_\_\_\_\_  **Approved**  **Denied**

**Assistant Superintendent/Designee:** \_\_\_\_\_  **Approved**  **Denied**

**For out of state, out of country or overnight field trips only:**

**Superintendent/Designee:** \_\_\_\_\_  **Approved**  **Denied**

**BOE Approval:** \_\_\_\_\_  **Approved**  **Denied**