FIELD TRIP REQUEST FORM

Revised 5/2022

Procedural Guidelines: Field trips are covered under Board policy 6153. Field trips should support course or club curriculum. The following parameters will be applied to all field trips:

- Three weeks prior to the field trip (or six weeks prior to an out of state overnight trip) submit this field trip request form with a curriculum justification statement and a proposed roster of students.
- Upon approval of the trip, formalize all arrangements for transportation and other costs.
- Ensure that all students and parents complete and sign the permission form.
- Provide alternative plans for students who are not attending the field trip.
- Submit a <u>final</u> roster of participating students to all faculty and administrators at least <u>7</u> calendar days prior to trip. The list cannot be changed after this point. (There are no refunds after this point.)
- Blackout dates apply including: first week of each semester, last week of each quarter, week before, during and after Smarter Balance; exam week; last week of April; the month of June. SAT & PSAT (see your school administrator for more information).
- On the morning of the trip, submit the final roster and a copy of every permission form to the attendance secretary.
- Keep the original permission forms in your possession throughout the trip.
- Students will be allowed to take 5 field trip days per marking period/ 12 trip days per year. It is both the student's and the sponsoring teacher's responsibility to know this. The main office will publish a field trip attendance report upon request.

Field Trip Request Form

Date of Request:	Title and Destination of Trip:	Date of Trip:	
Sponsoring Department:	Person in Charge:	Is this an overnight trip? YES No	
Number of Students:	Number of Chaperones:	Names:	
Number of Busses			
Type of Trip:	Time of Departure:	Time of Expected Return:	
Educational [] Recreational []	Time to Arrive:		
Mode of Transportation:	Cost of Transportation:	Cost of Food:	
Cost of Lodging:	Other Costs:	Other Costs:	
Total Cost of Trip:	Source of Revenue:	Student Cost:	
Cost Checklist:	Checklist:		
Transportation	YesNo Cafet	eria Notified	
Food	YesNo Subst	Substitute Arranged	
Lodging	YesNo Mass	ter Calendar Notated	
Other	YesNo Plans	Plans Made for Non-Attendees	
\$ Total	YesNo Tracp	hones needed# of es	
Signature of Person in Charge of the Field Trip: Date of Signature:			

FIELD TRIP APPROVAL PROCESS

	Approved	Not Approved	Date
Department Chair			
Principal			
Superintendent			
Board of Education (For overnight, out-of-state trips)			
IN-STATE DAY TRIPS OUT-OF-STATE DAY TRIPS IN-STATE OVERNIGHT TRIPS	OUT-OF-STAT	E OVERNIGHT	TRIPS
Approved by Principal	Approved by I	Principal	
Approved by Superintendent	Approved by S	Superintendent	
LICE OF ALL CTAR TRANC		Board of Education	on
USE OF ALL STAR TRANS	PORTATION		
When the field trip is approved, the main office secretary w (203) 263-0841.	ill fax this form t	o All Star Transpo	rtation at
Date of Trip: Destination	tion:		
Departure Time: Time to arrive at event:	Γime to leave eve	ent: Returr	n Time:
Number of Students and Chaperones: Number	er of Busses need	ed	
Secretary's Signature:			

TEACHER IN CHARGE MUST EMAIL <u>WENDY.CAREY@ALL-STARTRANSPORTATION.COM</u>, SHE WILL THEN RESPOND WITH A PRICE QUOTE AND ESTIMATED TIME AND MILEAGE OF EACH TRIP. ALSO, WHEN A FIELD TRIP IS CANCELED, THE PERSON IN CHARGE OF THE TRIP MUST NOTIFY THE TRANSPORTATION COMPANY.

Field Trip Permission Form Parent Section

Dear Parent or Guardian: A field trip has been planned involving your child. If you approve of your child's participation, please complete the following information.

Field Trip date:	Destination:
Mode of Transportation:	Cost to Student:
Departure Time:	Return Time:
Overnight: Yes No (If yes, roo	mmates will be assigned; students' requests will be considered.)
My son/daughter	has my permission to go on the on for emergency medical care if the need should arise. The owing medical conditions (if applicable):
Here is the emergency contact and any ot my son/daughter:	her additional medical information that may assist in caring for
	ts are based on the number of students who choose to participate. ncel their reservations eight or more days before the field trip date.
Parent Signature:	Date:
Field Trip I	Permission Form Student Section
responsible for all work missed during quizzes, obtaining class notes, and comp	btaining permission from teachers to attend this field trip. I am this activity, making prior arrangements for missed tests and pleting missed homework. I also understand that I am responsible hool and the organization hosting the field trip.
Student's Signature:	Date:
Principal's Signature:	