## **Student Field Trip Request Form (To be completed by educator planning trip)**

**Directions**: Please complete this form and attach required documents. Building principal must approve before request can be sent to the Superintendent for final approval.

Teacher(s):	Grade or Group:
Destination:	Number of Students:
Date(s) of Trip:	Number of School Days:
Time of Departure:	Time of Return:

## Type of Trip – Complete the required information in the appropriate section.

□ Overnight (K-8), Out-of-State Travel (K-12) – Principal and Superintendent Approval REQUIRED.

(See: Board Policy 2075, Administrative Procedure 2075P for details. Use Form 2075F-2 for planning.)

- Letter to Principal and Superintendent describing concept for trip, including curricular rationale and general plans. (Letter should be submitted at least six months ahead of trip, when circumstances permit.)
- Draft of parent permission slip with a letter explaining trip details. Please attach.
- □ Number of HSD Chaperones (21 or older): \_\_\_\_\_ (ratio ranging from 1:10 to 1:14 depending on trip) Please attach list.
- □ First Aid (Minimum of one chaperone must be first aid certified.) Provide copy of current certification.
- □ Fingerprinting necessary / verified for any non-HSD employee who will be unsupervised with students.
- Type of transportation to be utilized (school bus preferred if possible) Attach additional sheet describing all modes of transportation to be used on trip including any tours while at destination.
- Housing: Hotel: \_\_\_\_\_ Other: \_\_\_\_\_
- Cost to Student (Attach description of fundraising activities and preliminary budget)
- Cost to School or District. (Please provide detail.)

□ **Out-of-Country Travel** – Principal and Superintendent Approval **REQUIRED**.

- (See: Board Policy 2075, Administrative Procedure 2075P for details. Use Form 2075F-2 for planning.)
  Letter to Principal and Superintendent describing concept for trip, including curricular rationale and general
  - plans. (Letter should be submitted at least six months ahead of trip, when circumstances permit.)
- Draft of parent permission slip with a letter explaining trip details. Please attach.
- Number of HSD Chaperones (21 or older): \_\_\_\_\_ (ratio at least 1:10) Please attach list.
- First Aid (Minimum of one chaperone must be first aid certified.) Provide copy of current certification.
- □ Fingerprinting necessary / verified for any non-HSD employee who will be unsupervised with students.
- □ Type of transportation to be utilized Attach additional sheet describing all modes of transportation to be used on trip including any tours while at destination.
- Housing: Hotel: \_\_\_\_\_ Other: \_\_\_\_\_
- Cost to Student (Attach description of fundraising activities and preliminary budget)
- Cost to School or District. (Please provide detail.)
- Possible additional insurance required. Contact Business Administrator at 324.2040.

Teacher or Sponsor signature:	_ Date:
Principal signature (signifies approval):	_ Date:
Superintendent's signature (signifies final approval):	Date:
Rev. 12.21.2012, 2.14.2017, 3.8.2022	