DISTRICT 709 FIELD TRIP REQUESTS

In accordance with School District Policy District 6160, District 709 recognizes properly planned, well conducted, and carefully supervised field trips may be a vital part of the curriculum. School field trips are encouraged within available resources and requirements outlined below.

DIRECTIONS: All staff are required to submit a Field Trip Request **prior** to the field trip being finalized with the involved students and to:

- > Receive administrative and/or extra-curricular coordinator approval for all instructional and supplementary field trips
- > Receive administrative reviewal and school board approval for all extended trips (Exceptions may be granted by the school board chair to accommodate emergencies.)

DEFINITIONS:

<u>Instructional Trips</u> - Trips that take place during the school day, relate directly to a course of study, and require student participation. Fees may not be assessed against students.

<u>Supplementary Trips</u> - Trips in which students voluntarily participate in and which often take place outside the regular school day, but do not include overnight stays. Financial contributions may be requested of students.

Extended Trips Within Minnesota and Continental United States - Trips that involve one or more overnight stops within Minnesota or the Continental United States and may be instructional or supplementary and are voluntary in nature. Extended field trips require school board approval prior to the trip.

| INSTRUCTIONAL TRIP ACTI Principal: | • | roved | Name: |
|---------------------------------------|-------------------------------|----------------------|---|
| | ☐ Not / | Approved | Date: |
| SUPPLEMENTAL TRIP ACTI | ON | | |
| Principal: | ☐ Appr | oved | Name: |
| | □ Not / | Approved | Date: |
| | | | |
| İnstru | ctional/Supp | olementa! Trips need | not be sent to District office. |
| | | | |
| EXTENDED TRIP ACTION | | | |
| Principal: | Reco | mmended | Name: Kathi Kusch Marshall |
| | ☐ Not F | Recommended | Date: 10/8/18 |
| | | | 11112 |
| Assistant Superintendent: | ☑ Reco | mmended | Name: |
| | ☐ Not F | Recommended | Date: |
| | | 2 | |
| School Board: | ☐ Appr | oved | Name: ———— |
| | □ Not A | Approved | Date: ———— |
| The second second | a | | |
| All extended trip propos | | | nt Superintendent's Office to be placed on the agenda for approval. |
| | was on the states at the hill | | my province of the profit. |

FIELD TRIP REQUEST FORM

| ate | e of Submission: | | | | |
|-----|--|--|--|--|--|
| /pe | e of Trip: | | | | |
| \$ | | /i | | | |
| | Organization/Grade/Course Planning Trip: Wolf Ridge Family Trip | Gradie | | | |
| | Contact Person (Responsible for Checklist Completion): Kakhi Kusch Mars | 6-11 | | | |
| | Contact reson (responsible to one chist completion). //acm //10364 4/10/3/16 (1 | | | | |
| | Field Trip Date(s): Oct 26, 27, 28 Destination: WOLF Ridge | | | | |
| | Field Trip Overview (Include events, establishments and locations): | | | | |
| | Field Trip Departure from School (Date and Time): October 26.2018 2:5 | 15 Por | | | |
| | Field Trip Return to School (Date and Time): 2660 67 28 2018 3:0 | | | | |
| | | | | | |
| | Objectives of Field Trip: Outdoor Environmental learning | | | | |
| | Team Building | | | | |
| | Relationship to Curriculum or Student Learning: | | | | |
| | ACCOUNT ACCOUN | | | | |
| | Planned Follow-up Field Trip Activities: | | | | |
| | Field Trip Budget Request | | | | |
| | Field Trip Budget Request Estimated Expenses | \$ // (170 | | | |
| | Field Trip Budget Request Estimated Expenses Total Admission/Fees 740.00 @ 85 Stuckers | \$ /1,900 | | | |
| | Field Trip Budget Request Estimated Expenses | \$ /1.900 | | | |
| | Field Trip Budget Request Estimated Expenses Total Admission/Fees Total Meals Total Lodging Total Transportation | \$ /1.900 | | | |
| | Field Trip Budget Request Estimated Expenses Total Admission/Fees Total Meals Total Lodging Total Transportation | \$ \$ | | | |
| | Field Trip Budget Request Estimated Expenses Total Admission/Fees Total Meals Total Lodging Total Transportation School District Vehicle(s) Commercial Transportation Carrier ~ Name: | \$ \$ | | | |
| | Field Trip Budget Request Estimated Expenses Total Admission/Fees Total Meals Total Lodging Total Transportation | \$ \$ | | | |
| | Field Trip Budget Request Estimated Expenses Total Admission/Fees Total Meals Total Lodging Total Transportation School District Vehicle(s) Commercial Transportation Carrier ~ Name: | \$ \$ | | | |
| | Estimated Expenses Total Admission/Fees Total Meals Total Lodging Total Transportation □ School District Vehicle(s) □ Commercial Transportation Carrier ~ Name: □ Private Vehicle (requires certificate of insurance) ~ Name: | \$ \$ | | | |
| | Field Trip Budget Request Estimated Expenses 140.00 @ 35 Stuckers Total Admission/Fees 140.00 @ 35 Stuckers Total Meals Total Lodging Total Transportation School District Vehicle(s) Commercial Transportation Carrier ~ Name: Vayoger Bus Company Private Vehicle (requires certificate of insurance) ~ Name: Total Additional Stipends: | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | | | |
| | Estimated Expenses Total Admission/Fees Total Meals Total Lodging Total Transportation □ School District Vehicle(s) □ Commercial Transportation Carrier ~ Name: □ Private Vehicle (requires certificate of insurance) ~ Name: Total Additional Stipends: Other: Total | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | | | |
| | Estimated Expenses Total Admission/Fees Total Meals Total Lodging Total Transportation □ School District Vehicle(s) □ Commercial Transportation Carrier ~ Name: □ Private Vehicle (requires certificate of insurance) ~ Name: Total Additional Stipends: Other: Total Revenues | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | | | |
| | Estimated Expenses Total Admission/Fees Total Meals Total Lodging Total Transportation ☐ School District Vehicle(s) ☐ Commercial Transportation Carrier ~ Name: ☐ Private Vehicle (requires certificate of insurance) ~ Name: Total Additional Stipends: Other: Total Revenues District Budget Code: \$ | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | | | |
| | Estimated Expenses Total Admission/Fees | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | | | |
| | Estimated Expenses Total Admission/Fees | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | | | |
| | Estimated Expenses Total Admission/Fees | \$ \$ | | | |

RETURN COMPLETED REQUEST TO BUILDING PRINCIPAL

FIELD TRIP REQUEST CHECKLIST - All Field Trips DIRECTIONS: Please complete checklist. No attachments are necessary.

| | Collect Parent/Guardian Permission for Student Participation in Field Trip (Include request for special information - i.e. allergies, medications, special needs.) |
|---------------|--|
| <u>图</u> 图 | Gain Access to Cell Phone for Field Trip Plan Arrangements for Early Pick-Up or Late Drop-Off Students (if necessary). Guide: May choose to leave message on school voice mail to help with late drop off. |
| Ø. | |
| | Plan Administration of Student Medication and First Aid Needs (if necessary) Guide: Contact School Nurse. |
| | Develop and Communicate Action Plan if Student Gets Lost on Trip Arrange Adult Chaperones for Field Trip (if necessary) Guide: One (1) adult for every twenty (20) students depending on field trip. Parent volunteers are encouraged when possible or appropriate. |
| | Develop and Communicate Teacher and Adult Chaperone Expectations |
| (X) | Example: Supervision duties, no smoking, no alcohol Planned Itinerary |
| | TIME LOCATION Oct 26 Welf Riage Oct 28 |
| | Maintain Student Roster and Check-in/Check-out Procedure Arrangement for Safety Needs (i.e. crossing guards) |
| | ature of Contact Person: Karti Kuscl Maulel |
| | FIELD TRIP REQUEST CHECKLIST – Extended Trip Only DIRECTIONS: Please complete checklist and attach all appropriate materials. |
| | Develop and Complete Field Trip Itinerary and Emergency Telephone Contacts Letter to Parents/Guardians Note: Attach tentative planned itinerary. Arrange Funding of Expenses During Trip Arrange Meal Plans Arrange Lodging Plans and Room Assignments Collect Family Emergency Information for Students Example: Home phone numbers, emergency contacts, medical information Additional Information Note: Provide any additional information. |
| Signa | ture of Contact Person: |