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, the Continental United States, or a Foreign Country - Trips that involve one or more overnight stops within Minnesota, the Continental United States, or a Foreign Country (externally sponsored) 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:	Approved	Name:
	Not Approved	Date:
SUPPLEMENTAL TRIP ACTI	ON	
Principal:	Approved	Name:
	Not Approved	Date:
Instruction EXTENDED/EXTERNALLY SI		need not be sent to District office.
Principal:	Recommended	Name:
	Not Recommended	Date:
Assistant Superintendent:	Recommended	Name:
	Not Recommended	Date: 42310
School Board:	Approved	Name:
	Not Approved	Date:
All extended trip propos	sals must be sent to the Ass Education Committee mee	sistant Superintendent's Office to be placed on the eting agenda for approval.

FIELD TRIP REQUEST FORM

Date of Submission:

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Туре	e of Trip: 🖂 Instructional 🖂 Supplementary 🔀 Extended 🗔 Externally Sp	oonsored*
		01
1.	Organization/Grade/Course Planning Trip: Hovors American Gavernment	lass
2.	Contact Person (Responsible for Checklist Completion): <u>Ethan Fisher</u>	
3.	Field Trip Date(s):	
4.	Field Trip Overview (Include events, establishments and locations): Competition in Washing	Tom De
т.	As well as general sight seeing in Washing Ton D.C.	Junio C
	INS Well as general signerseeing IN Washing ION Dick	
	Appak.	
5.	Field Trip Departure from School (Date and Time): 4-23-10-6:00A.M Duluth	Airport
	Field Trip Return to School (Date and Time): 4-27-10 - 10:00 pm - Dulum	Airport
6.	Objectives of Field Trip: TO Represent STate of Minnesotan	N The
	National "We The Raple" Competition.	
7.	Relationship to Curriculum or Student Learning: Competition is in line with The	o Class
	Curriculum	
8.	Planned Follow-up Field Trip Activities:	·
9.	Field Trip Budget Request	·
	Estimated Expenses Total Admission/Fees	\$
	Total Meals	\$
	Total Lodging	\$
	Total Transportation	\$
	School District Vehicle(s) School District Vehicle(s) School District Vehicle(s)	
	Private Vehicle (requires certificate of insurance) ~ Name:	
	Total Additional Stipends:	\$
	Oth are	¢
	Total	\$1,074 00 5 TactenT
		\$1,074 of Stadent expenses Covered for Donations
	<u> </u>	expenses Covered
	District Budget Code: \$	1 DAVITIONS
	Booster Group \$	rom Dona
	Donations \$	
	Student Fees \$	
	Total Additional Stipends: \$ Total \$	
11.	Revièwed/Completed Request Checklist: Yes No	
	e Assistant Superintendent's office must receive a signed waiver form for each student participating in a asored trip prior to the departure date.	n externally
F	RETURN COMPLETED REQUEST TO BUILDING PRINCIPAL	

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

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DITECTION	s. Fields complete encodest. No allabilitions are necessary.
 Collect Parent/Guardian Permission for medications, special needs.) Gain Access to Cell Phone for Field T Plan Arrangements for Early Pick-Up Guide: May choose to leave message Plan Meal Arrangements (if necessary Reminder: Notify food service of non- Plan Administration of Student Medica Guide: Contact School Nurse. Develop and Communicate Action Plan Arrange Adult Chaperones for Field T 	be Structure Letter Sent to Parents/Guardians or Student Participation in Field Trip (Include request for special information - i.e. allergies, ip or Late Drop-Off Students (if necessary). e on school voice mail to help with late drop off.) participation. tion and First Aid Needs (if necessary) n if Student Gets Lost on Trip ip (if necessary) (20) students depending on field trip. Parent volunteers are encouraged when possible or nd Adult Chaperone Expectations
-	
TIME LOC/	ATION
/	
Maintain Student Roster and Check-in	Chack-out Procedure
Arrangement for Safety Needs (i.e. cro	
Analgement for Galety Needs (i.e. cit	song guardoj
Signature of Contact Person:	
DIRECTIONS:	Trip ignments for Students ergency contacts, medical information

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INSTRUCTIONAL TRIP ACTI	ION	
Principal:	Approved	Name:
	Not Approved	Date: <u>41210</u>
SUPPLEMENTAL TRIP ACTI	ON	
Principal:	Approved	Name:
	Not Approved	Date:
Instruc		ed not be sent to District office.
		All
Principal:	Recommended	Name:
	Not Recommended	Date:
Assistant Superintendent:	Recommended	Name:
	Not Recommended	Date:
School Board:	Approved	Name:
	Not Approved	Date:
All extended trip propos	sals must be sent to the Assis Education Committee meeti	stant Superintendent's Office to be placed on the ng agenda for approval.

FIELD TRIP REQUEST FORM

Type of Trip:	🔀 Instructional 🖂 Supplementary 🖂 Extended 🖂 Externally Sponsored*
1. Organizatio	n/Grade/Course Planning Trip:
	rson (Responsible for Checklist Completion): John Busney
3. Field Trip D	ate(s): <u>April 29-30</u> Destination: <u>St- Paul-Como Zono Science</u>
4. Field Trip O	verview (Include events, establishments and locations): Come Zup - 3-4 hours, them
	e museum - SciENCE programs included - camp in the
	n - leave for home ~10:00 AM Fri.
5. Field Trip Do	eparture from School (Date and Time): Opril 29th 9:00 Am
	eturn to School (Date and Time): april 30 ²⁰ , 2:00 pm
	of Field Trip: Sec animals we've stucked in school in animal
	Experience Science at the Sci. Moseure.
	,
7. Relationship	to Curriculum or Student Learning: MN. Sci. Strundards

9. Field Trip Budget Request

11.

Estimated Expenses	
Total Admission/Fees	\$ 800.00
Total Meals	\$
Total Lodging	\$
Total Transportation	\$102600
School District Vehicle(s)	(out
Commercial Transportation Carrier ~ Name:	
Private Vehicle (requires certificate of insurance) ~ Name:	
Total Additional Stipends:	\$
Other:	\$
Total	\$ 1826.00

Revenues		
District Budget Code:	\$	
Booster Group	\$	
Donations	\$	
Student Fees	\$	_
Total Additional Stipends:	\$	
Total	\$	
Reviewed/Completed Request Checklist:	🗹 Yes	🖂 No

*The Assistant Superintendent's office must receive a signed waiver form for each student participating in an externally sponsored trip prior to the departure date.

RETURN COMPLETED REQUEST TO BUILDING PRINCIPAL

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

 Develop and Communicate Student Discipline Expectations Forward Field Trip Explanation and Fee Structure Letter Sent to Parents/Guardians Collect Parent/Guardian Permission for Student Participation in Field Trip (Include request for special information - i.e. allergies, medications, special needs.) 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. Plan Meal Arrangements (if necessary) Reminder: Notify food service of non-participation. 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 Example: Supervision duties, no smoking, no alcohol Planned Itinerary
TIME LOCATION 12:00-B:00 Como Zoc 4:30pn-10:00A MN. Sci. Museum 10:00A MN. Sci. Museum 10:00A MN. Sci. Museum 2:00 Orrive of School
Maintain Student Roster and Check-in/Check-out Procedure Arrangement for Safety Needs (i.e. crossing guards) Signature of Contact Person:
FIELD TRIP REQUEST CHECKLIST – Extended/Externally Sponsored 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.
Signature of Contact Person:

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