



**Bristol Public Schools**  
**Field Trip Request Form for Travel**  
**Outside the Continental United States**  
**Page 1 of 2**

All field trips outside of the Continental United States must be approved by the Board of Education. The following information must be presented to the BOE no less than 6 months prior to the date of the proposed trip. The Superintendent and building principal will be provided with a final list of student participants, hotels and flight arrangements one month prior to departure.

<b>Name of School:</b>	Bristol Central High School ▾		
<b>Date of Request:</b>	Apr 20, 2026		
<b>Trip Destination:</b>	📍 Fano		
<b>Proposed Dates:</b>	Mar 8, 2028 to Mar 17, 2028		
<b>Approx. # Students:</b>	20 students max		
<b>Grade Levels:</b>	11-12		
<b>Requesting Teacher(s):</b>	Gina Gallo		
<b>Chaperones</b>	1. Kathy Archibald	4	
	2. Benjamin Oksanen	5.	
	3. ⚙ Person	6.	
	<i>If more teachers/chaperones are required, please attach a list on a separate piece of paper.</i>		
<b>Transportation</b>	<input checked="" type="checkbox"/> Bus	<input checked="" type="checkbox"/> Train	<input checked="" type="checkbox"/> Plane
	<input type="checkbox"/> Other:		
<b>Lodging</b>	<input type="checkbox"/> Hotel/Motel	<input checked="" type="checkbox"/> Private Homes	<input type="checkbox"/> Other:
<b>Name of Travel Agency</b>	Worth the Trip Travel		
<b>Total Estimated Budget</b>	\$30,000		
<b>Total Estimated Cost to Student</b>	\$1,500-\$1900		
<b>Fundraising</b>	<b>Are fund raising activities planned?</b>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

	<b>Please describe: We will offer 4 scholarships for students, funding will be raised through dine-to-donate events, bingo night, and Italian themed events for the community</b>
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**Proposed Itinerary: Please write a brief narrative explaining the purpose and educational value of the proposed trip.**

**This request aims to maintain our 20 year partnership with the G, Nolfi school in Fano, Italy. A sister school partnership is a long-term agreement that will support curriculum and pedagogy enhancements for both schools. An international partnership consisting of reciprocal student exchanges have been shown to encourage personal development and teach valuable life skills such as leadership, perseverance and independence. The goal of this exchange is to create opportunities for our students to use language in a full-immersion setting while acting as cultured global citizens and ambassadors of Bristol. A program such as this aligns with our vision of the graduate a supports our global mindset reinforcing our initiative to “ work collaboratively with individuals representing diverse cultures, religions and lifestyles in a spirit of mutual respect and open dialogue in personal, work and community contexts as well as understanding other nations and cultures including the use of non-English language”**



Bristol Public Schools  
**Field Trip Request Form**

(Use for all Field Trips)

Page 1 of 2

<b>Name of School:</b>	Bristol Central High School ▾		
<b>Date of Request:</b>	Apr 20, 2026		
<b>Trip Destination:</b>	📍 Fano		
<b>Proposed Dates:</b>	Mar 8, 2028 to Mar 17, 2028		
<b>Type of Trip</b>	<input type="checkbox"/> Curriculum-based	<input checked="" type="checkbox"/> Enrichment	<input type="checkbox"/> Recreational
	<input type="checkbox"/> Athletic		
<b>Approx. # Students:</b>	20		
<b>Grade Levels:</b>	11-12		
<b>Requesting Teacher(s):</b>	Gina Gallo		
<b>Chaperones</b>	Gina Gallo		
	1. Kathy Archibald		
	2. Benjamin Oksanen		
	3. & Person		
	<i>If more teachers/chaperones are required, please attach a list on a separate piece of paper.</i>		
<b>Transportation</b>	<input checked="" type="checkbox"/> Bus	<input checked="" type="checkbox"/> Train	<input checked="" type="checkbox"/> Plane
	<input type="checkbox"/> Car		
<b>Lodging</b>	<input type="checkbox"/> Hotel/Motel	<input checked="" type="checkbox"/> Private Homes	<input type="checkbox"/> Other:
<b>Total Estimated Budget</b>	\$30,000		
<b>Total Estimated Cost to Student</b>	\$1,500-\$1900		
<b>Fundraising</b>	<b>Are fund raising activities planned?</b>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

	Please describe: We will offer 4 scholarships for students, funding will be raised through dine-to-donate events, bingo night, and Italian themed events for the community	
Please describe if/how lunch or snacks will be provided to students on the trip so that the school is aware of potential dietary needs.	All food/dining will be assumed by the host families	
The field trip plan and proposed student list was reviewed with the school nurse on: (See signed School Health Field Trip Approval Form)	this will be submitted once the list is created	

**Plan and Educational Rationale:** Please attach a detailed plan for the proposed trip with a separate statement that describes the importance of the trip to the students’ classroom education and the district’s specific curricular focus for those children.

I have read the **DISTRICT GUIDELINES FOR PLANNING PUPIL FIELD TRIPS**, and I hereby request approval to plan a school-sponsored trip.

**Gina Gallo Reinhard**

\_\_\_\_\_  
Name of Requester

\_\_\_\_\_4/20/2026\_\_\_\_\_  
Date

**FOR OVERNIGHT and/or OUT OF STATE TRIPS ONLY**

<b>What comparable educational experience is available in the Bristol area?</b>	
There is no comparable educational experience in the United States. A full-immersion program allows our students the opportunity to apply their language skills in the most authentic environment - with families, at school, in markets and in cultural experiences.	
<b>Proposed dates</b>	Mar 8, 2028 to Mar 17, 2028
<b>Proposed lodging information</b>	full-immersion, family stay: hosting italian families in Bristol fall 2027, travel to Italy Spring 2028

**FOR TRIPS OUTSIDE OF THE CONTINENTAL U.S. ONLY:**

*Please attach the approval of Exhibit A- Field Trip Request Form for Travel Outside the Continental United States*

**APPROVALS**

	<b>Approval Needed</b>	<b>Timeline</b>	<b>From</b>	<b>Signature</b>	<b>Date</b>
<b><i>Trips that do not include a signed School Health Field Trip Approval form should not be approved.</i></b>					
	Day Field Trip	4 weeks before	Principal only		
	<b>APPROVAL FOR PLANNING OF:</b> Overnight OR Out of state OR Out of country trip	12 weeks before	Principal		
			Superintendent		
	<b>FINAL APPROVAL FOR</b> Overnight OR Out of state OR Out of country trip	4 weeks before	Principal		
			Superintendent		



**School Health Field Trip Approval Form**

Page 1 of 2

School nurses will review this list with the field trip coordinator. When medication training and other student medical issues have been resolved, the nurse will initial the checklist, which will then be submitted for the principal's approval. This is a mandatory form in order to receive approval for the trip.

Trip Destination: \_\_\_\_\_ Fano, Italy \_\_\_\_\_

Field Trip Coordinator: \_\_\_\_\_ Gina Gallo \_\_\_\_\_ Date of Field Trip: \_\_\_\_\_ March 2028 \_\_\_\_\_

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

- \_\_\_ 1) Medication training completed by the employee designated to administer and maintain medications (including inhalers, Epi-pens, etc.)
- \_\_\_ 2) Necessary arrangements/training for students with special medical conditions (e.g., diabetes, asthma, seizure disorders, cardiac condition, etc.)
- \_\_\_ 3) Arrangements have been made for special equipment needed (e.g., all-terrain wheelchair for the beach)
- \_\_\_ 4) Arrangements have been made for access to emergency medical services.
- \_\_\_ 5) Lunch/snack arrangements have been made in consideration of students with food allergies.
- \_\_\_ 6) School nurse recommendations on additional supplies needed (e.g., first-aid kit, water, etc.)
- \_\_\_ 7) Nursing care plans provided to field trip coordinator as needed.
- \_\_\_ 8) For out-of-state or out-of-country trips, consultation and necessary permission have been obtained regarding nursing practice and delegation in the respective location.
- \_\_\_ 9) Arrangements have been made for communication (e.g., access to cell phones, walkie-talkies for staff during activity, etc.)
- \_\_\_ 10) Other medical or safety issues addressed

**School Health Field Trip Approval**

Page 2 of 2

This portion of the form must be completed for any off-grounds excursions during the school day.

Date of Trip: March 2028 Date of Request: 4/20/206

Teacher(s): Gina Gallo

Destination: Fano, Italy

Departure time: \_\_\_\_\_ Return time: \_\_\_\_\_

Type of transportation: Plane, Bus, Train

Staff participating: Gallo, K Archibald, Oksenen  
\_\_\_\_\_  
\_\_\_\_\_

Students participating: Attach list

Number of students: \_\_\_\_\_ Number of chaperones: \_\_\_\_\_

Plan for telephone access: \_\_\_\_\_

Reviewed by \_\_\_\_\_ Date: \_\_\_\_\_  
Nurse

Reminder: Student information sheets, medication, and first-aid kits should be brought on all field trips.



**Bristol Public Schools  
Field Trip Permission Form**

***A parent signature is required on this form for all field trips.***

I have read the attached description of the field trip to be held on (date) \_\_\_\_\_ to (places) \_\_\_\_\_ and hereby consent to the participation of my child, \_\_\_\_\_ in this field trip.

I authorize school officials to send my child home, at my expense, from any field trip should his/her behavior warrant such action.

I also consent to any emergency medical treatment that my child may require during the course of this trip. Specifically, I give permission for any EMT or emergency room personnel providing medical treatment to my child to release any protected health information regarding my child to accompanying school staff in accordance with the provisions of the Health Insurance Portability and Accountability Act ("HIPPA"). In signing this authorization, I understand that I am allowing school personnel to be present in my absence during any emergency interventions involving my child and consent to the on-site exchange of medical information necessary for immediate medical treatment. Any protected health information released to school staff during an emergency shall be treated as confidential student information protected from further disclosure in accordance with the provisions of Connecticut law and the Family Educational Rights and Privacy Act ("FERPA").

I understand that, because travel plans must be determined well in advance of departure, any prepayments toward this trip may be *nonrefundable*.

I understand further that Homeland Security issues may force the cancellation of this trip and forfeiture of my payment. By signing below, I understand and accept that circumstance may arise between now and departure which could cause the trip to be cancelled, which may result in financial loss. I further understand that the Bristol Board of Education will not be liable for any financial losses I may incur should this trip be cancelled due to security or other unforeseen reasons.

***I understand that I need to inform the school nurse of the medical condition/allergies my child has that requires any care needs on the field trip.***

***I understand that I must contact the school nurse to make arrangements if my child requires medication during the field trip.***

\_\_\_\_\_ Date \_\_\_\_\_ Signature of Parent/Guardian

Parent Name: \_\_\_\_\_

Phone #'s to be reached during field trip-

Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Physician: \_\_\_\_\_ Hospital of Choice: \_\_\_\_\_

I give my permission to the teacher-in-charge of the trip to seek emergency medical attention for ***(Student's Name)*** \_\_\_\_\_ and I ask that I be notified as soon as possible.

I accept the responsibility for any expense incurred for that medical treatment.

\_\_\_\_\_ Insurance Company

\_\_\_\_\_ Insurance ID Number

Bristol Public Schools  
**Rules for Field Trip Chaperones**

The Bristol Public Schools appreciate your agreement to serve as a field trip chaperone. For your protection and that of the school district, we want to assure that your responsibilities are clear, as follows:

1. Chaperones will be asked to present identification prior to taking the trip. All chaperones must be 21 years of age or older.
2. Chaperones serve at the direction of the teacher/sponsor and/or administrators present. Please take your lead from them.
3. Chaperones are not responsible and have no authority for disciplining of students. While it is permissible to redirect a student's attention verbally, any behavior problems should be referred to the teachers and/or administrators present.
4. Chaperones do not have the authority to dispense medication, even non-prescription medication. If there is any request concerning medication, even aspirin or Tylenol, please refer it to the teachers and/or administrators present.
5. If you are asked to stay with a particular student or group of students, it is important that you do so. If it is necessary to leave your group, please get the attention of and notify a teacher or administrator before doing so, so that alternative arrangements for supervising the students can be made.
6. Chaperones are not permitted to bring other children to events, including their own children.
7. Persons other than staff members serving as chaperones on overnight field trips may be asked to submit a background security check.
8. Chaperones are bound by and must follow all rules of the Bristol Public Schools, including but not limited to the strict prohibition against use of alcohol at any time while on a school trip.
9. Chaperones are asked to refrain from smoking in the presence of students.
10. If there are any special rules or requirements, the teachers and/or administrators supervising the trip will inform you.

I acknowledge receipt and that I have read these rules for chaperones and agree to abide by these and all other school rules and regulations.

\_\_\_\_\_

Chaperone Name

\_\_\_\_\_

Date

**SAMPLE – Please adapt for your trip**

**Letter to Parents/Guardians**

Re: Fano, Italy

Dear Parents and Guardians:

As you know, your son or daughter is a member of the Italian Program at BCHS. This year, we have proposed a trip to Fano, Italy.

Not surprisingly, school districts around the country are continually reconsidering the approval of field trips, based on the possibility of terrorist attacks and other concerns related to the safety of students. Trips involving travel to foreign countries are of particular concern. While the decision to participate or not participate in an approved trip will in each case be made by individual students and their parents, we will be reviewing any and all proposed trips on a continuing basis to determine whether certain trips should be canceled altogether.

At this point in time, the Board of Education has approved the proposed trip to Fano in the Spring of 2028. However, the Board reserves the right to reconsider that approval at anytime between now and the time of departure of the trip, based on the circumstances existing at the time. In addition, in the event that the Board decides at any point to rescind its approval of this trip, thereby canceling the trip, the Board will not be responsible for any financial losses or penalties incurred by the affected students or their parents or guardians.

We are confident that parents and students will understand our need to reassess on a continuing basis whether particular trips should go forward, based on the circumstances existing at the time. While we wish that we could provide students and parents with a definite statement about whether a trip will or will not go forward, that is simply not possible in these difficult, unpredictable times.

We appreciate your understanding in these matters, and we invite you to contact us if you have any questions.

Sincerely,

Bristol Public Schools Permission Form

I, \_\_\_\_\_, hereby give my permission for my son/daughter,  
\_\_\_\_\_,  
(name of parent/guardian) (name)

a student in the Bristol Public Schools, to participate in the Italian Exchange Program during the 2027-2028 school year.

In giving this permission I have indicated my agreement to the following by circling my response:

I understand that Bristol will be providing transportation to and from the following location:  
\_\_\_\_\_.

Bristol shall have no responsibility to wait for my child if my child is not present when the transportation is leaving to go to or return from this outing.

Agreed

I understand that the adult advisors to the Ski Club will ride the transportation with the students and be available on site at the outing. However, these advisors will have no responsibility for providing instruction, ensuring that my child has the correct equipment, that the equipment is in proper and safe working order, or that my child uses the equipment properly and in a safe manner. The advisors also shall have no responsibility for monitoring what trails or areas my child uses at the outing.

Agreed

Do you understand the nature of the trip and the risks inherent in skiing and snowboarding activities available to your student during the outing?

Yes No

Will your child require any special care or accommodations in connection with this trip? Include a complete description of your child's allergies, medication requirements and any medical, physical or other conditions related to care/supervision of your child.

Yes No

If yes, please explain: \_\_\_\_\_

We will contact you immediately in the event of the need for emergency medical treatment for your child. However, in the event of an urgent need to authorize emergency medical care, do you grant permission for medical treatment to be given and/or for the supervising staff (including volunteers) to take your child to the physician, dentist or hospital if an accident or serious illness occurs on the trip and you and the emergency contacts cannot be located in a timely fashion. You also understand and agree that you and not Bristol will have the responsibility for paying the costs of any such treatment.

Yes No



Page 2

Ski Club Waiver

I, the undersigned parent or guardian of \_\_\_\_\_, hereby acknowledge that I have been properly advised, cautioned, and warned by the proper administrative personnel at the Bristol Public Schools that by participating in the Ski Club Outings, a student is exposing her/himself in the risk of serious injury, including but not limited to the risk of sprains, fractures, and ligament and/or cartilage damage which could result in a temporary or permanent, partial, or complete impairment in the use of limbs; brain damage, paralysis, or even death. Having been so cautioned and warned, it is still \_\_\_\_\_'s desire to participate in the activity listed above. It is hereby further acknowledge that \_\_\_\_\_ does so with full knowledge and understanding of the risk of serious injury to which \_\_\_\_\_ is exposing himself/herself by participating in the aforementioned activity. [insert child's name in each space]

The Bristol Board of Education, the Town of Bristol and their agents, employees, or members shall bear no responsibility for any accident or injury (including death) sustained by the Student while participating in the aforementioned trip to (location(s) and all related travel and activities, including skiing and/or snowboarding to the extent permitted by law. To this end, I (for myself and the Student) hereby release and forever discharge the Board of Education, the Town of Bristol, and any of their members, employees or agents (including volunteers and chaperones) from any and all claims, demands, rights or cause of action of whatsoever kind or nature arising from, or by reason of, any and all known or unknown foreseen or unforeseen, bodily or personal injuries (including death), or damage to property and the consequences thereof which hereafter may be sustained by the Student or any parent or guardian or their heirs, executors or assigns, arising out of or in connection with the Student's participation in the Ski Club outings and all related travel and activities. Furthermore, the Parent hereby expressly stipulates and agrees to indemnify and forever hold harmless the Bristol Board of Education, the Town of Bristol, and any of its members, employees or agents (including volunteers and chaperones) against any and all loss from any and all claims, demands, or action in law or in equity that may hereafter be made or brought by any person or by the Student or by anyone acting on his behalf for the purpose of enforcing a claim for damages on account of any injury (including death) any damage arising out of or in connection with the Student's participation in the trip and all related travel and activities, and the costs of medical services.

I \_\_\_\_\_ represent and warrant that I am signing this Waiver  
[name of parent/guardian]

**voluntarily and knowingly, with a full and complete understanding of the terms and conditions of this Waiver.**

\_\_\_\_\_  
**Parent/Guardian or Adult Student Signature**

\_\_\_\_\_  
**Date**

**Suggested Roles and Responsibilities**

**School Administrators**

1. Ensure adherence to districtwide policy for school-sponsored trips.
2. Communicate policy to all parties involved including staff, parents and students.
3. Encourage and support team planning for successful trips.
4. Encourage parents meeting to discuss details and requirements of the trip.
5. Support school nurse notification (at least four weeks prior to trip) and approval of all trips to identify and meet the health needs of students prior to your approval.
6. Ensure that the field trip coordinator has made arrangements by contacting the Director of Special Services to request a nurse at least three weeks prior to the trip for nursing coverage, if needed.
7. Serve as the key contact for emergencies during trips and involve the school nurse and school medical advisor as needed.
8. Determine alternative options or cancellation of trip if all students cannot attend the field trip due to the inability of the school district to accommodate the health or other special needs of students.

**School Nurses**

1. Adhere to district policy for field trips.
2. Obtain health information on all students participating from their health records and parental information.
3. Conduct a health and safety assessment of student needs based on a multitude of factors including severity of needs, location of trip, staff attending the trip, etc.
4. Contact visiting state board of nurses for permission to practice in that state if attending the trip and the state does not offer visiting status. (for out-of-state trips)
5. Contact visiting state board of nurses for information on nurse practice act, delegation and administration of medications laws and rulings if any care will be delegated to unlicensed personnel, such as the teacher or other school staff. (for out-of-state trips)
6. Develop nursing and emergency care plans for all students that will require medication, treatments or monitoring on the trip.
7. Obtain necessary medication and equipment for trip from parent at least three school days prior to departure.
8. Prepare all necessary medication, equipment and an emergency bag for the school staff.

9. Provide training to school staff regarding medication administration according to the Regulations and physician orders.
10. Provide training to school staff regarding any health care procedures to be performed and review emergency responses.
11. Determine competence of unlicensed school personnel to carry out medication administration and health care procedures.
12. Provide supervision to staff during the trip.

**Important Note:** School nurses may not provide the staff with more than one dose of medication from their school supply as this is considered dispensing and is not in the scope of practice for any nurse. For multiple doses, parents must provide the appropriate supply (i.e., three-day supply for three-day overnight field trip) from their pharmacy and ensure it is stored in an appropriately labeled pharmaceutical container.

#### **School Personnel (teachers and other staff)**

1. Adhere to districtwide policy regarding all aspects of field trips.
2. Include the school nurse in planning field trips to avoid any potential cancellations or situations of concern.
3. Notify the school nurse and obtain school nurse approval prior to principal approval and authorization of trip.
4. Contact the Director of Special Services to request a nurse for the trip if one is needed at least three weeks prior to the trip.
5. Communicate to parents the need for updated health and emergency information.
6. Participate in all trainings regarding health and safety of students prior to departure.
7. Be prepared to address emergency situations.
8. Contact the principal and school nurse as needed for health questions or emergencies while on the field trip.
9. Meet with the school nurse upon return to review documentation and performance of procedures and to debrief about the overall experience of the trip in meeting the students' health needs.

#### **Parents/Students**

1. Adhere to districtwide policy regarding all aspects of field trips.
2. Provide the school with updated health (including medication administration orders when necessary) and emergency information as required.
3. Adhere to districtwide policies regarding medication administration and self-administration of medications by students while on field trips.

4. Request from local pharmacy and provide school with an appropriately labeled medication container with only the amount of medication needed on the field trip.
5. For parents of students with special health care needs, consider attending if appropriate and requested by school personnel with the clear understanding that a school district cannot mandate or require parents to attend field trips as a means of accommodating a child with special health care needs.

Source: **Field Trips: Guidance for School Nurses**, Connecticut State Department of Education, June 2014.

**Frequently Asked Questions (Pertaining to Medical Issues)**

1. **Can a parent sign a relinquishment waiver to bring Glucagon for day trips only? Or can they sign a waiver for overnight trips as well?**

No. An order from the provider and parent approval for all medication actions (such as withhold, substitute, discontinue, etc.) for any school-sponsored trip is necessary.

2. **Can a parent assign a friend or relative to go on a field trip with their child in order to administer an emergency medication?**

No. According to the C.G.S. and regulations regarding medication administration in schools, only school nurses, qualified personnel or parents may administer medication to students.

3. **If the school district has current standing orders from our school physician (medical advisor) and signed parental permission on our Emergency Consent Forms, do we need a new authorization form for administration of medication for the trip signed by the child's medical provider?**

Yes, unless the school nurse is accompanying the trip. Standing orders may be administered only by a nurse after an assessment of the student's complaint and symptoms. Any medications delegated to qualified personnel in schools must have an individual student Medication Authorization Form.

4. **Can school nurses package multiple doses of meds for an extended day field trip?**

No. School nurses may not provide the staff with more than one dose of medication from their school supply as this is considered dispensing and is not in the scope of practice for any nurse.

5. **Can volunteers (such as parents) administer medications to students, other than their own children, on a field trip?**

No. According to the medication regulations, other than the school nurse, only "qualified personnel for schools" may administer medication in schools. "Qualified personnel for schools means (a) a full-time employee who meets the local or regional board of education requirements as a principal, teacher, occupational therapist or physical therapist and has been trained in the administration of medication in accordance with Section 10212a-3 of these regulations; (b) a coach and licensed athletic trainer who has been trained in the administration of medication pursuant to Section 10-212a-8 of these regulations; or (c) a paraprofessional who has been trained in the administration of medication pursuant to Section 10-212a- 9 of these regulations. For school readiness

programs and before- and after-school programs, directors or director's designee, lead teachers and school administrators who have been trained in the administration of medication may administer medications pursuant to Section 10-212a-10 of these regulations."

**6. Is the school nurse responsible for non-school sponsored field trips?**

No. Although school personnel (including school nurses) are often aware of non-school sponsored field trips or planned privately sponsored trips, they are not required to plan, coordinate or supervise these activities.

**7. Do nurses require permission from other states when administering nursing services on field trips?**

Yes. For field trips outside Connecticut, it is necessary that the school nurses determine the licensure and practice acts in the visiting state or country. The regulations for practice can vary from state to state and because Connecticut is not part of the Nurse Licensure Compact, the nurse is only licensed to practice in Connecticut.

Source: Field Trips: Guidance for School Nurses Field Trips, Connecticut State Department of Education, June 2014