



## School-Sponsored Trip Preliminary Approval Checklist

Trip:

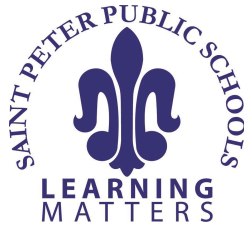
Destination Details:

Dates of Trip:

Sponsoring Organization/Teacher:

Purpose of Trip Clearly Defined (Educational, Extracurricular, Athletic, etc.):

- |   |     |    |
|---|-----|----|
| 1. Is the trip aligned with the school's mission and educational objectives?  | Yes | No |
| 2. Does the trip support curriculum, student development, or extracurricular goals? (Please attach the narrative and include the education/activity objectives for the proposed trip) | Yes | No |
| 3. Will students miss school during the proposed trip? If yes, # of days _____  | Yes | No |
| 4. Will the trip interfere with students' academic progress or state testing schedules?   | Yes | No |
| 5. Has a clear itinerary been developed? (Please attach)  | Yes | No |
| 6. Is there an adequate ratio of chaperones to students? (Recommended 1:10)   | Yes | No |
| 7. Has the trip been reviewed for potential safety concerns at the destination?   | Yes | No |
| 8. Have emergency procedures and protocols been established and communicated?   | Yes | No |
| 9. Will background checks be completed for all chaperones and volunteers?   | Yes | No |
| 10. Is there a plan for student supervision, including headcounts and buddy system?   | Yes | No |
| 11. Is there an approved transportation provider? _____<br>NAME   | Yes | No |
| 12. What is the total estimated cost per student? \$ _____  |     |    |
| 13. Is fundraising available to help offset costs?  | Yes | No |
| 14. Are there procedures in place for students needing financial assistance?  | Yes | No |
| 15. Are payment collection processes outlined and documented? (Please attach)   | Yes | No |
| 16. Are there medical release and emergency contact forms in place? (Please attach)   | Yes | No |



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17. Are there parent consent forms in place? (Please attach)

Yes      No

Approved      ☐

Denied      ☐

Principal's Signature: \_\_\_\_\_

Date: \_\_\_\_\_