

FIELD TRIP REQUEST FORM

Date of Submission:

Type of Trip: Instructional Supplementary Extended

1. Organization/Grade/Course Planning Trip: OEE - 10-12th grade students
2. Contact Person (Responsible for Checklist Completion): Emily Pohl, Brigette Eckwood, Jamie Benne, Kaija Ell
3. Field Trip Date(s): 5/8/24 - 5/10/24 Destination: St. Paul / Minneapolis
4. Field Trip Overview (Include events, establishments and locations): Como Zoo & Conservatory, cultural dinner, see a play, minnehaha Falls hike, mall of America, cultural poetry slam, science museum, college tour -
5. Field Trip Departure from School (Date and Time): May 8th - 8:00 am.
Field Trip Return to School (Date and Time): May 10th - 5:00 pm.
6. Objectives of Field Trip: Educational Enrichment, Cultural Exploration, college readiness & exposure,
7. Relationship to Curriculum or Student Learning: Science, English, Culture & Social Justice Career & College readiness
8. Planned Follow-up Field Trip Activities: Cultural sharing & community building with students across the district; reflection, journal.
9. Field Trip Budget Request

Estimated Expenses	
Total Admission/Fees	\$2,880
Total Meals	\$2,400
Total Lodging	\$3,780
Total Transportation	\$5,000
<input checked="" type="checkbox"/> School District Vehicle(s)	
<input checked="" type="checkbox"/> Commercial Transportation Carrier ~ Name: <u>Voyager Transportation</u>	
<input type="checkbox"/> Private Vehicle (requires certificate of insurance) ~ Name: _____	
Total Additional Stipends:	\$
Other:	\$2000
Total	\$16,060

Revenues	
District Budget Code: <u>01E005211161366</u>	\$
Booster Group	\$
Donations	\$
Student Fees	\$
Total Additional Stipends:	\$
Total	\$

11. Reviewed/Completed Request Checklist: Yes No

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

- 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 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: _____

Jamu Bennett, Emily Pohl, Karja Ellis
Brigette Eckwood.

St.Paul Field trip Itinerary- OEE/East/Denfled/ALC

(Alternate to Cancelled Washington D.C Trip)

May 8th (Wednesday)- 10th (Friday)

Wednesday:

8:00am- leave Duluth - 22 School bagged breakfast and lunches

11:00am-2:00 Explore Como Zoo & Conservatory

2:00-3:00 College Tour/Program Information (Tech College)

3:00 check into hotel-Hampton Inn & Suites, St.Paul

5:00-9:00 Dinner & Play (Guthrie or alternative theater)

10:00pm- students in assigned room

Thursday:

10:00am- arrive to Minnehaha Falls- explore & mini walk

11:30am/12:00pm-3:00/4:00pm- explore MOA

Use meeting space at the hotel for Cultural Sharing/reflection - Or if the weather is nice, do it outside.

5:00pm- Dinner number 2 (TBD)

Poetry slam event-Tish Jones-Th 6-8pm Flava Cultural Cafe 632 University Ave West St. Paul.

8-10 Swimming/community building at Hotel.

10:00 pm- students in assigned rooms

Friday:

10:00am- check out of hotel

10:30pm- Arrive to Science Museum

10:30pm-1:00/1:30pm explore science museum

2:00pm- Lunch as group

3:30-5:30-Drive back to Duluth

5:30-Arrive back to Duluth

Denfeld- 6

ALC- 6

East- 6

18 students (6 from each site) + 4 female staff + 1 (maybe 2 if another will commit) male staff = 24 ppl total

Hotel- Hampton Inn & Suites 15 rooms @ 129 plus tax a night

- 18 students/2 = 9 rooms plus + 6 rooms for 6 staff = 3870 plus tax
 - Pool & continental breakfast
- 200 W 7th Street, St. Paul, MN 55102

Science Museum Admission- \$8.00 per student + \$5 omnitheater—\$13.00 x 23 = (\$312) I did 23 tickets but it would be less because we wouldn't need to pay for all the chaperones. I wasn't sure what the student: chaperone ratio needed to be

Play- \$70 ticket (\$1680)--Probably less--depending on group/student rate.

- Reached out to Group Sales, tickets are \$16 per student- waiting to see what seating this is as I asked for preferential seating

MOA- \$50 for All day pass to nickelodeon, Fly over America + lunch pass x 24ppm (\$1200)

Food-

- Lunch x 3 days = 24ppl @ \$15= \$360 x 3= \$1080
- Dinner x 2 nights = 24ppl @ \$20+ =\$480 with tip x 2 =\$980 (VERY HIGH END)
- Sam's Club Snacks- chips, drinks, granola bars, fruit, sandwiches, meat, bread, cheese, veggies = \$300

Transportation- \$5,000 -Coach Bus/Voyager Transportation

Twin Cities Permission Slip

Name: _____

Grade: _____ School: _____

- I give permission for my son/daughter to attend the Twin Cities 2 day overnight trip 05/08/24 to 5/10/24. I have spoken with him/her about good choices and our expectations for them.

I agree to allow ISD709 to use any photographic image or video of my child taken while participating in this event. These images may be used in promotions or other related marketing materials.

Parent Signature: _____ Date: _____

Contact number: _____

In case of an emergency , I give permission for my child to receive medical treatment. In case of such an emergency, please contact:

Emergency Contact Name: _____

Emergency Contact Number: _____

Special notes/medical considerations or anything you would like school staff to know:

_____ Initial here if student **CAN** swim in hotel pool/hot tub