

**DERBY HIGH SCHOOL**  
**School Trip Proposal / Request Form**  
**Travel / Study Approval for Out of State and or Overnight Trips**

School: Derby High School Principal: Pascale  
 Date(s) of Trip: June 19 - June 21 Trip Organizer(s): D. Lugo  
 Destination of Trip: Greensboro, NC New Balance Outdoor Track National Championships  
 Grade level of student participants: 9-12 No. of Students: 2-5  
 Educational Objectives including related classroom activities prior to / following the trip: \_\_\_\_\_  
Athletic competition at the national level

Funding Source(s): Private Fundraising  
 Complete if students are paying for all or part of the trip.  
 Total fees required from each student: Transportation Cost: \_\_\_\_\_ Event Fee: \_\_\_\_\_ Meals \_\_\_\_\_  
 Lodging: \_\_\_\_\_  
 Source(s) of funds for students who qualify for fee waiver: \_\_\_\_\_  
 Cost of Nurse (if applicable): NA Funding source: NA  
 Name of travel agent (if applicable): NA  
 Name of transportation service vendor: \_\_\_\_\_  
 No. of buses required: None Cost per bus: \_\_\_\_\_  
 Date / Time of trip: Departing Derby: 6/18/15 Returning to Derby: 6/21/15  
 Number of chaperones on trip: 2-3

**Completed forms should be submitted to the principal who, if the trip is approved, will forward this to the Superintendent of Schools and Board of Education for final approval.**

Include the information below when submitting this approval form. (Place a check mark by each item indicating its inclusion in the approval packet.)

- \_\_\_\_\_ Information outlining parental financial responsibility should there be an emergency cancellation
- \_\_\_\_\_ Parent / Guardian letter explaining the trip and travel itinerary
- \_\_\_\_\_ Parent / Guardian Permission and Acknowledgment of Risk for Student Travel Form
- \_\_\_\_\_ Emergency Plan (Includes arrangements for medical needs, parent / guardian contact information, access to communication devices, and procedures for general potential emergency situations)
- \_\_\_\_\_ List of Chaperone Names and Phone Numbers with MPS employees noted
- \_\_\_\_\_ Telephone Tree in the event of an emergency

Be sure the school administrator has a list of those students participating in the activity and a copy of the emergency contact numbers.

I / We certify that this trip proposal is in accordance with Derby Public Schools policies and corresponding regulations:

  
\_\_\_\_\_  
Signature, Trip Organizer(s)

Trip approved  
  
\_\_\_\_\_  
Signature, Principal / Assistant Principal

6/1  
\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature, Superintendent or Designee

\_\_\_\_\_  
Date

Trip Denied  
Reason: \_\_\_\_\_

\_\_\_\_\_  
Signature, Superintendent or Designee

\_\_\_\_\_  
Date

**Out-of State / Overnight Trips Checklist**

- Obtained approval at least three (3) weeks prior to the trip.
- Submitted list of participating students submitted to Principal and Health Office at least two (2) weeks prior to the trip.
- Submitted an updated list of participating students to Principal and Health Office on day of trip (No students should be added to the original list on the day of the trip.)
- Arranged substitute teacher with the Principal / designee if needed
- Arranged instructional and supervisory assignments for students not participating
- Arranged appropriate number of chaperones and provided orientation
- Clearly explained expectations of students
- Received parent permission forms and emergency medical forms

**Teacher Directions:** After your *School Trip Proposal / Request Form* has been approved, you are required to complete this form, and send it home to parents. Only those students whose parents have signed and returned the form to you will be permitted to go on the school trip. You should follow these directions: 1) Use one form per trip; 2) complete the school portion (top half) of form; 3) duplicate one form per student; and 4) send a copy home for parent and student signatures.

Be sure the school administrator has a list of those students participating in the activity and a copy of the emergency contact numbers.

I / We certify that this trip proposal is in accordance with Derby Public Schools policies and corresponding regulations:

Signature, Trip Organizer(s)

Trip approved

Signature, Principal / Assistant Principal

Date

6/1

Signature, Superintendent or Designee

Date

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