

DERBY PUBLIC SCHOOLS

School Trip Proposal / Request Form

Travel / Study Approval for Out of State and or Overnight Trips

School: Derby Middle School Principal: Rachael Caggiano
Date(s) of Trip: April 23, 2010 Trip Organizer(s): Kelly Annoman
Destination of Trip: NYC - Lunch at Bubba Gump + performance of "Phantom of the Opera"
Grade level of student participants: 6th, 7th, 8th No. of Students: 50-100

Educational Objectives including related classroom activities prior to / following the trip: _____

Students will gain the knowledge and understanding of the social + cultural impact theatre has on an audience. Students will enrich their learning by seeing a performance instead of reading about it.

Funding Source(s): families pay the trip cost of reading about it

Complete if students are paying for all or part of the trip. - Total \$165

Total fees required from each student: Transportation Cost: incl. Event Fee: incl. Meals: included
Lodging: N/A

Source(s) of funds for students who qualify for fee waiver: _____

Cost of Nurse (if applicable): — Funding source: — No students are identified with health concerns

Name of travel agent (if applicable): Joshua Doyon - Silver Mill Student Travel

Name of transportation service vendor: Silver Mill Student Travel

No. of buses required: 2 Cost per bus: included in price

Date / Time of trip: Departing Derby: April 23, 2010 / 7:00 AM Returning to Derby: approximately 7:00 PM

Number of chaperones on trip: 5-10 → depending on how many students attend.


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.)

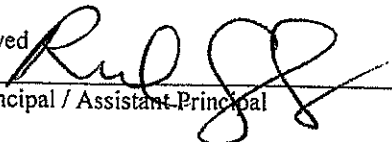
- Information outlining parental financial responsibility should there be an emergency cancellation
- Parent / Guardian letter explaining the trip and travel itinerary
- Parent / Guardian Permission and Acknowledgment of Risk for Student Travel Form
- Emergency Plan (Includes arrangements for medical 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

12/10/19

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
- No students are identified with health concerns

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.

December 20, 2019

Parents/Guardians,

We are thrilled to have a school wide field trip to New York City on April 23, 2019 to see "Phantom of the Opera" on Broadway and to have lunch at Bubba Gump Shrimp Co. in Time Square. We will leave DMS at 7:00 A.M. and return approximately 7:00 P.M. We have an educational, yet fun and exciting day in store for the students!

The cost of the trip is \$165. This includes round-trip motor coach transportation, ticket to performance of "The Phantom of the Opera", and lunch at Bubba Gump Shrimp Company.

If you are interested in having your child attend this educational trip, please sign the attached permission slip and have your child return with the deposit to:

Mr. Dryer in 6th grade,
Mrs. Sisson in 7th grade, or
Ms. Anroman in 8th grade

Payment schedule:

Deposit of \$40 is due by January 10th
Second payment of \$40 is due by February 7th
Balance of \$85 is due by March 19th

If you have any immediate questions, please do not hesitate to contact me, Kelly Anroman, at kanroman@derbyps.org

Thank you,
Kelly Anroman

**PARENT/GUARDIAN PERMISSION AND
ACKNOWLEDGEMENT OF RISK FOR STUDENT TRAVEL**

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.

Parent Directions:

Please read this form, and, if you give your child permission to attend the school trip,
sign and return it to your child's teacher.

Date(s) of Trip: April 23, 2020

Trip Organizer(s): Kelly Anroman

Destination of Trip: New York City - Phantom of the Opera

Educational Objectives: Students will gain the knowledge and understanding of the social + cultural impact theatre has on an audience.

Supervision:

- Students will be directly supervised by adults at all times.
- Students will be directly supervised by adults with the following exceptions: _____
- A School Nurse will be present on this school trip.

Transportation Provided: School Bus Charter Bus Personal Vehicle Leased Vehicle

Related Risks: Swimming Pool Amusement / Theme Park Beach or Ocean Other None

Student Agreement:

Student Name: _____ Grade: _____

While participating on this school trip, I will accept responsibility for maintaining conduct in accordance with the Derby High School Code of Conduct and I will follow directions of the school trip organizers / chaperones at all times.

Student Signature: _____ Date: _____

Parent / Guardian Permission:

I have read and understand the attached description of the school trip. I also understand that participation in the school trip will involve activities of school property; therefore, neither the Board of Education nor its employees and volunteers will have any responsibility for the condition or use of any nonschool property.

I give permission for _____ to participate in all aspects of this school trip.

Parent / Guardian Signature: _____ Date: _____

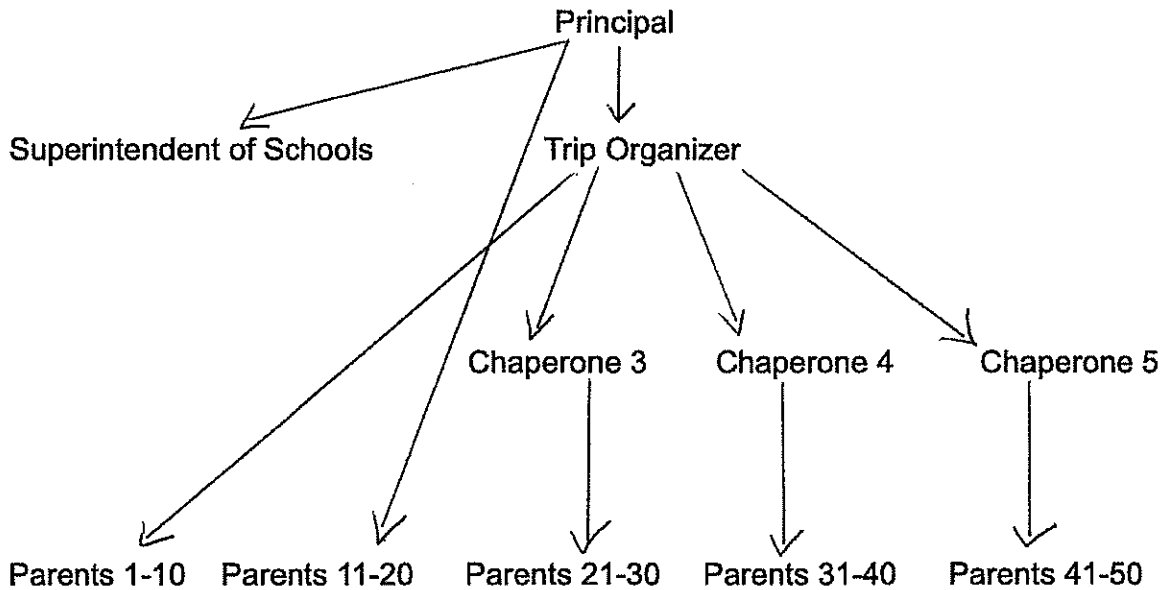
Parent Contact Number: _____

Chaperones for New York Broadway on April 23, 2010

Kelly Anroman	203-231-3813	DMS 8th grade teacher
Tom Fulton	203-906-4640	DMS 8th grade teacher
Suzanne Sisson	860-919-7815	DMS 7th grade teacher
Joseph Dryer	203-482-3230	DMS 6th grade teacher
Rachael Caggiano	203-535-5579	DMS Administrator

Depending on the number of students attending in each grade level will determine the additional chaperones that are needed/

Emergency Phone Tree



Derby Middle School

Emergency Medical Form and Over The Counter Medication Authorization

Student Name Male/Female Homeroom/Advisory Teacher Grade

Address Date of Birth

Parent Guardian Information: Name

Home Telephone Work Telephone Cell Phone

Parent Guardian Information: Name

Home Telephone Work Telephone Cell Phone

In case of illness or accident during school hours when no one can be reached at home, please indicate below a person who may be contacted and/or transport your child.

Emergency Contact Name Relationship Telephone Number

Emergency Contact Name Relationship Telephone Number

Health Information *You may use the back side of this form for any additional information you wish to alert school personnel to*

- 1. Is your child currently receiving treatment from a doctor for asthma? If Yes please describe any triggers, frequency, symptoms and medications
2. Allergies (medications, food, environmental/seasonal Does the allergy require the use of an EpiPen?
3. Medical/mental health conditions
4. Surgeries/Hospitalizations
5. Medications at home or school
6. Any Physical limitations or restrictions for activity?

Physician Telephone

Does your child have health insurance? Yes No Insurance Company Policy #

I authorize the school nurse/school personnel to administer the following over the counter medications on an as needed basis, after an assessment has been made. These medications will be given per package instructions based on the child's weight and age. These medication orders have been approved by the Derby Public Schools Medical Advisor (CT Public Act No. 212A revised #88-360)

Please check (✓) next to medications you authorize the school to administer and indicate reason for administration

- Tylenol/Acetaminophen Reason
Advil/Motrin/ Ibuprofen Reason
Tums/Antacids Reason
Midol/Pamprin Reason
Aleve/Naproxen Reason
Benadryl/Antihistamine Reason
Bacitracin/Antibiotic ointment Reason
Dramamine Reason

Signature of Parent/Legal Guardian

Date

Derby Middle School Student Expectations for New York City

The opportunity to attend the Derby Middle School field trip to New York City is a privilege that is offered to grade six through eight students. With such a privilege, there are expectations that the school places on students who choose to attend this trip before, during, and after this activity. The trip is an extension of the learning experience offered at Derby Middle School and as such student conduct still falls under the provisions, guidelines, and expectations of the Derby Middle School Student Handbook and the policies established by the Derby Board of Education. The following are reminders of conduct specific to the learning opportunities off the Derby Middle School campus.

1. Students are reminded that they represent Derby Middle School at all times and their conduct should reflect the values and expectations of our school and community and should in no way reflect negatively on the reputation, image or name of Derby Middle School. Student conduct that disregards the policies, guidelines, rules and expectations will face consequences commensurate with the student action up to and including suspension, recommendation for expulsion and potential police referral. Unwanted behavior will result in parent notification, notification of administration and potential law enforcement notification.
2. Students will be under the guidance and authority of the trip chaperones from the time they are dropped off prior to leaving and until the parents/guardians pick them up upon return. Students will respect the decisions and expectations of the chaperone throughout this time. Students should feel comfortable to address any concerns or issues with any of the school chaperones and expect to be heard.
3. In the event a student becomes ill or has an accident, the chaperones will first assess the situation and determine a course of action. Parents will be notified as soon as possible of a student's condition. Chaperones will always act in the best interest of the student. If the student needs medical care beyond that provided by the chaperones, parents will be notified and parents will assume any medical expenses including those not covered by the student's medical insurance policy.
4. All medication, including over the counter medications will be stored and dispensed by a designated trip chaperone. All medications must have prior physician's approval with a written order. All over the counter medications must have parent/guardian authorization and will be dispensed using manufacturer's guidelines as outlined on the container. No medication or over the counter medication is permitted outside of its properly labeled container. Students are not permitted to self-administer any medication other than an inhaler.
5. Students must also be respectful of the transportation provided during the activity. Students are to use the storage bins appropriately and clean up any mess they make. Students are not to stand on the seats in the bus at any time. They must obey the instructions provided by the bus driver and chaperons. Any damage on the bus will be

the responsibility of the student and the student's parents/guardians. The school will not assume responsibility for damage a student causes.

6. Students will not leave the assigned groups during the trip. Students may not enter any vehicle other than the transportation provided, unless in an emergency.

Signing below indicates that the parent/guardian and the student have read the expectations and agree to the guidelines established for the trip. Signing this document permits the student to enjoy the activity with clear understanding of school expectations.

Print Parent/Guardian Name

Print Student Name

Parent/Guardian Signature

Student Signature

Cell Phones/Electronic Devices/Social Media

Cell phones, or electronic devices, are permitted at certain times on the New York City trip. They are the sole responsibility of the owner, and he/she takes full responsibility if lost or misplaced. They may use under the following guidelines.

1. If a chaperone requests your cell phone, it is turned over immediately.
2. If a chaperone, tour organizer, guide or other attraction authority requests cellphones be turned off or put away, that all students comply.
3. If a cell phone/music is used on the bus, earbuds need to be used and not disturb others seated in the surrounding area.
4. No cell phone use at any time during chaperone or guide instructions.
5. Music or ear buds/headphones used only on the bus when chaperones are not addressing the students. They are not to be used in the restaurant or the show.
6. No pictures / video can be taken without permission of those being photographed/videoed.
7. All pictures / videos / posts should follow school expectations and follow the districts' Code of Conduct and Standards of Behavior. Pictures deos / posts deemed inappropriate will be subject to the school's discipline policy.
8. No posts to social media can be made without permission of those seen or mentioned in the post.
9. The school has the right to post pictures and events of the trip to the school sponsored social media.

The use of the cell phone and other electronic devices are privileges extended to the students. As privileges, they can be revoked at any time for just cause. Cell phones that are revoked will be held by the chaperone until the trip returns to Derby. The cell phone or electronic device will be returned to the parent.

Print Student Name

Student Signature

Parent Signature

Dear Parents/Guardians,

With the upcoming trip to New York, we want to ensure that we have all lines of communication open with your child in case of emergencies. This is optional; however, if you choose, we are asking for your child's cell phone number that they will have while on the trip. Please complete the bottom part of the form and return if you choose to have the chaperones have your child's cell phone number.

I give permission for the chaperones on the DMS New York Broadway trip to have my child's _____ cell phone.

The cell phone number is _____

Parent Name

Parent Signature

Thank you,

Kelly Anroman