DISTRICT 709 FIELD TRIP REQUESTS

In accordance with School District Policy District 6160, District 709 recognizes properly planned, well conducted, and carefully supervised field trips may be a vital part of the curriculum. School field trips are encouraged within available resources and requirements outlined below.

DIRECTIONS: All staff are required to submit a Field Trip Request **prior** to the field trip being finalized with the involved students and to:

- > Receive administrative and/or extra-curricular coordinator approval for all instructional and supplementary field trips
- Receive administrative reviewal and school board approval for all extended trips (Exceptions may be granted by the school board chair to accommodate emergencies.)

DEFINITIONS:

Instructional Trips - Trips that take place during the school day, relate directly to a course of study, and require student participation. Fees may not be assessed against students.

<u>Supplementary Trips</u> - Trips in which students voluntarily participate in and which often take place outside the regular school day, but do not include overnight stays. Financial contributions may be requested of students.

Extended Trips Within Minnesota and Continental United States - Trips that involve one or more overnight stops within Minnesota or the Continental United States and may be instructional or supplementary and are voluntary in nature. Extended field trips require school board approval prior to the trip.

		AND THE RESIDENCE AND	
INSTRUCTIONAL TRIP ACTION			
Principal:		Approved	Name:
	Ü.	Not Approved	Date:
SUPPLEMENTAL TRIP ACTION		•	
Principal:		Approved	Name:
		Not Approved	Date:
Instructional/Sug	plemo	ntal Trips need not i	pe sent to District office. EXTENDED TRIP ACTION
EXTENDED TRIP ACTION	1.4		
Principal:	<u>M</u>	Recommended	Name: 101/10 / Alanier Al
		Not recommended	Date: 1/0/3/17
	\bigcirc		18/11
Assistant Superintendent:		Recommended	Name:
		Not recommended	Date: ///8//7
School Board:	Ü	Approved	Name:
		Not Approved	
			Date:
All aytanded frin proposels	. missand	ha caint to the Acala	toint Commistandentle Office to be aloned on the
All extended hip proposals			tant Superintendent's Office to be placed on the
	Fanc	ation Committee med	sting agenda for approval.

FIELD TRIP REQUEST FORM

Date of Submission: October 10, 2107			
Type of Trip: Instructional	Supplementary	X Extended	
Organization/Grade/Course Planning Trip:		HOSA 11th and 12th Grade	
2. Contact Person (Responsible for Checklist C	Completion):	Kimberly Olson	
3. Field Trip Date(s): November 30 - December 2, 2017		Destination:	
		Camp Ripley 15000 Highway 115 Little Falls City; MN	
4. Field Trip Overview (Include events, establish	ments and locations):	Emergency Preparedness camp, lessons in an authentic setting on CPR, First Aid, Psychological First Aid and medical Reserve Corps along with educational training sessions for HOSA, and breakouts to learn more about careers in the medical fields.	
5. Field Trip Departure from School (Date and T Field Trip Return to School (Date and Time):		November 30, 2017 at 7:00 am December 2, 2017 at 7:00 pm	
6. Objectives of Field Trip:		MN HOSA Emergency Preparedness Camp	
7. Relationship to Curriculum or Student Learning.		Leadership, teamwork, POS and Career Pathway explorations, Partnership for CTE, implementation of Health, Science Programs (HSP), parliamentary procedures and citizenship.	
8. Planned Follow-up Field Trip Activities:		Midwinter, State and National Conference for HOSA. The student will will be presenting two camps for our community implementing the information and skills taught.	
9. Field Trip Budget Request:			

Estimated Expenses		- Terminal Section of Commission Conference
Total Admission/Fees (8 students and 1 advisor - estimate the cost is \$85.00 each)	\$765	
Total Meals: (Students are covered by conference fee)	\$27.00	(SPN-489-PRIPAPENASING USSES HARM-1884)
Total Ladging: \$60.00 per person	\$540	
Total Transportation	\$480	
School District Vehicle(s)		
Commercial Transportation Carrier ~ Name:		
Private Vehicle (requires certificate of insurance) ~ Name:		
Total Additional Stipends:	\$	
Other: Subs	\$288	
Total	\$2120	

	Revenues	
District Budget	Code:01-380-005-428-000	\$513
Booster Group		\$
Donations		\$
Student Fees		\$1607
Total Additional Stipends:		\$
Total		\$2120

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, médications, 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 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					
THE PERSON AND A PROPERTY OF THE PERSON AND A PERSON AND					
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.					
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Signature of Contact Person:					