INDEPENDENT SCHOOL DISTRICT 191 EXTENDED FIELD TRIP – APPLICATION FOR FINAL APPROVAL EXHIBIT 3

(To be provided to the Office of Superintendent prior to travel. Information based on actual.)

Sponsoring Activity: <u>Youth Service Trip: Dominican Republic</u> Date
2. School: Burnsville High School
3. Name(s) of Sponsoring Staff: Courtnée Jackson Floback & David McDevitt
4. Destination: <u>Dominican Republic</u>
5. Dates of Trip: March 31 st -April 7 th
6. Paragraph Description of Proposed Program: Take a cultural journey into the communities of the northern coast. While you're immersed in the local heritage, you'll gain insight into the issues impacting local children today. Working together with area nonprofits and community members, you'll help build sustainable solutions to the educational, social, and economic challenges they face. We will work with local nonprofits to better understand the needs of each community and then focus projects on those issues. Themes include: — Access to education — Youth development — Generational poverty
7. Educational Objectives of Extended Field Trip: MEANINGFUL SERVICE: Working side by side with locals, you'll gain insight into the challenges they face and build lasting solutions to help empower the community.
CULTURAL IMMERSION: Live in the communities you serve, celebrating customs and
forming lasting connections with locals.
<u>LEADERSHIP DEVELOPMENT:</u> Field Director takes your global service experience even further, developing and strengthening leadership skills through activities and workshops.
8. Transportation Information: a. Bus-Name of Bus Company:
☑ b. Plane-Name of Airline:
(attach flight schedule) □ c. School Vehicle □ d. Commercial Transportation

9. Lodging

Hotels: If, yes: Name, location and contact information of hotel

10. Complete Itinerary:

DATES ITINERARY

March 31 st , 2025	Meet your Field Director at the airport, then travel to the North Coast. After you arrive at your accommodations, settle in and meet your group for the country orientation and safety overview.
April 1 st , 2025 - April 5 th , 2025	As communities evolve, so do their needs. That's why we work closely with non-profits to better understand the local challenges. Since projects are determined closer to your actual tour date, here's a glimpse at what a typical day might look like: — Each morning, begin your service project with children in a nearby village. — Spend afternoons immersed in cultural activities. — Evenings are a chance to reflect, discuss events as a group, and draw connections between the day's work and relevant global issues.
April 6 th , 2025	Explore a mangrove forest by boat with your local tour guide or take a guided hike on the beautiful North Coast.
April 7 th , 2025	Depart for home

11. Names and Grades of Students:

Name Grade Home Phone Number

Akins, Karlene	10	612-205-1243
Eckberg, Brianna	10	507-667-9519
Floback, Dylane	7	612-845-0837
Garcia Escarcega, Jose	12	952-652-7084
Inamagua Urgiles, Alison	10	612-261-7716

Johnson, Logan	12	952-445-7890
Jones, Jerald	12	612-749-4698
Marshall, Yelenia	10	612-836-8041
McDevitt, Connor	10	612-207-9813
Reyes Lopez, Luis	10	651-235-3544
Ruiz, Anjelica	10	952-594-4533
Selle, Skylar	9	612-598-9125

^{**}Attach emergency/health forms for all student participants.

12. Do any of the participating students require special medical accommodations? If so, please list.

<u>NA</u>			

13. Names of Chaperones:

Name Emergency Contact and Phone Number

Courtnee Jackson Floback-	612-845-0837
Summer Jackson	612-865-6112 emergency contact
David McDevitt-	612-207-9813
Jane McDevitt	612-760-4442 emergency contact

14. Participation Costs

Breakdown of trip costs:	Estimate	Actual
Participant Expenses		
Airfare		
Ground Travel		
Lodging		
Food		
Variation in rate and payments based upon the student's field		

trip registration date.		
Participant Share of Group Expenses	•	
Chaperone Expenses (Airfare, Ground, Lodging)		
Staff Advisor Salary and Benefits		
Liability Insurance		
Miscellaneous		
Number of substitutes needed		
Personal Expense		
Food Incidentals, spending money		Recommended Tipping: Tour director \$42-56 Bus Driver \$21 Tour Guides \$7-14\$70-91 total and personal personal spending \$20-30/day\$160-240
Total Anticipated Costs per Student	\$3789	\$4019-4120

The foregoing is based on _12__ student participants. Costs will vary with the number of participants and currency exchange rates.

- 15. What provision has been made for students for whom financing the trip is an issue? Fundraising was provided to all attendees that wanted to utilize it. Cub Foods bagging, Dave & Busters Gift Cards. Payment plans were provided by EF Tours throughout the 1.5 years of preparation.
- 16. Were students Informed of Rules of Conduct **YES** (Attach Copy of Rules of Conduct Distributed to Students).
- 17. Were chaperones Informed of Rules of Conduct **YES** (Attach letter of instructions to chaperones).
- 18. Is there at least one chaperone for every ten students? YES
- 19. Will students be missing more than three days of school? YES NO

20. Complete guidelines for selecting travel providers-conforms with policy Description **Yes** No (See Attached, page 5 & 6)

Description Yes No (See Attached, page 5 & 6)	
Employs at least five full time agents	
ARC and IATA appointments	
Incorporated in U.S.A.	
In business for at least 5 years	
Audited financial statements (attached)	
Insurance certificates (attached) (\$1,000,000 Commercial Liability Coverage) (\$1,000,000 Error and Omission Coverage)	
Competitive Price (References provided, verified and attached)	
Airline (if applicable) Major, regularly scheduled, commercial airline	
Ground Transportation Certificate attached	

21. Contact information for sponsoring staff if we need to reach you on the trip):	f while on extended field trip (number to call
Cell Phone: <u>612-845-0837</u>	
Email: cfloback@isd191.org	
Other: <u>cfloback@gmail.com</u>	
Approval of Building Administrator	Date
Approval of Superintendent	Date

THIS CERTIFICATE IS ISSUED AS A M CERTIFICATE DOES NOT AFFIRMATIVE BELOW. THIS CERTIFICATE OF INSUREPRESENTATIVE OR PRODUCER, AND	ATTI ÆLY JRAN D TH	ER (OR ICE E CE	NEGATIVELY AMEND, DOES NOT CONSTITUT ERTIFICATE HOLDER.	AND EXTEN	CONFERS N ID OR ALTE CONTRACT E	O RIGHTS (ER THE CO BETWEEN T	JPON THE CERTIFICAT VERAGE AFFORDED B HE ISSUING INSURER(E HOI Y THE S), Al	E POLICIES UTHORIZED
IMPORTANT: If the certificate holder is If SUBROGATION IS WAIVED, subject t this certificate does not confer rights to	o the	e ter	ms and conditions of th	e polic	y, certain po forsement(s)	olicies may r			
RODUCER MARSH USA, LLC. 9630 Colomade Blvd. Suite 410 San Antonio. TX 78230				PHONE IAIC, NO E-MAIL	. Exti:		FAX (A/C, No):		
Attr: ROW.CertRequest@Marsh.com				ADDRE	55:	HRERIS AFFOR	DING COVERAGE		NAIC #
				INSURE	R.A.: Liberty Mut				23035
SURED EF Services. Inc.				$\overline{}$	RB: If P&C Inst				
Two Education Circle, Cambridge, MA 02141 US	SA			INSURE	R C: XL Insuran	се Company SE			
EF Education First International AG					R D: HDI Global	SE			
Selnaustrasse 30, 8001 Zurich, Switzerland				INSURE					
OVERAGES CERT	IFIC	ATE	NUMBER:	HOLL	RF: 003924278-12		REVISION NUMBER: 1	0	
THIS IS TO CERTIFY THAT THE POLICIES (INDICATED. NOTWITHSTANDING ANY REC CERTIFICATE MAY BE ISSUED OR MAY PI EXCLUSIONS AND CONDITIONS OF SUCH P	ERTA	IMEN	NT, TERM OR CONDITION : THE INSURANCE AFFORDS	OF ANY	N ISSUED TO CONTRACT THE POLICIES	OR OTHER DESCRIBED	OCCUMENT WITH RESPEC	OT TO	WHICH THIS
R	NSD S	UER	POLICY NUMBER		POLICY EFF (MM/DD(YYYY)	POLICY EXP (MM/DD/YYYY)	UMIT	8	
X COMMERCIAL GENERAL LIABILITY	nac.		EB2-691-544157-074		10/01/2024	10/01/2025	EACH OCCURRENCE	8	5,000,000
CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	8	100,000
H							MED EXP (Any one person)	\$	
H							PERSONAL & ADV INJURY	\$	5,000,000
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	5,000,000
X POLICY JECT LOC							PRODUCTS - COMPIOP AGG	\$	5,000,000
AUTOMOBILE LIABILITY	\rightarrow	\dashv					COMBINED SINGLE LIMIT (Ea accident)	s	
ANY AUTO							(La acodent) BODILY INJURY (Per person)	s	
OWNED SCHEDULED AUTOS ONLY							BODILY INJURY (Per accident)	\$	
HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$	
	_							\$	
UMBRELLA LIAB X OCCUR			LP0000048395-19		10/01/2024	09/30/2025	EACH OCCURRENCE	8	10,000,000
X EXCESSIVAB CLAMS-MADE							AGGREGATE	8	10,000,000
DED RETENTIONS WORKERS COMPENSATION	\rightarrow	\rightarrow					PER OTH-	8	
AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE Y/N							STATUTE ER EL EACH ACCIDENT		
OFFICERMEMBEREXCLUDED? N	N/A							s	
If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	s	
1st Excess Layer Liability	\neg		MA619824		10/01/2024	09/30/2025	Per Occurrence/Aggregate Lim	t	25,000,00
2nd Excess Layer Liability			MA629824		10/01/2024	09/30/2025	Per Occurrence/Aggregate Lim	t	10,000,00
SCRIPTION OF OPERATIONS / LOCATIONS / VEHICLE	es (Ac	ORD	191, Additional Remarks Schedul	le, may be	attached if more	space is require	d)		
ERTIFICATE HOLDER				CANC	ELLATION				
EF Education First International, AG Haldenstrasse 4 6005 Luceme SWITZERLAND				ACC	EXPIRATION ORDANCE WI	DATE THE	ESCRIBED POLICIES BE CA PREOF, NOTICE WILL B Y PROVISIONS.		
				AUTHO	RIZEO REPRESEI		Marsh USA .		

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AGENCY CUSTOMER ID: CN101569164

LOC #: San Antonio



ADDITIONAL REMARKS SCHEDULE

Page 2 of 2

AGENCY			NAMED INSURED	
MARSH USA, LLC.			EF Services, Inc. Two Education Circle, Cambridge, MA 02141 USA	
POLICY NUMBER				
			EF Education First International AG Selnaustrasse 30, 8001 Zurich, Switzerland	
CARRIER	NA NA	AIC CODE	Serialistrasse 34, 0001 Zunon, Switzerland	
1			EFFECTIVE DATE:	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM TITLE: Certificate of Liability Insurance FORM NUMBER: 25

The General Liability policy evidenced above excludes coverage for foreign entities, i.e. EF Education First International, A.G. General Liability coverage is provided for foreign entities under the Master Global Program with Policy numbers LP0000048395-19, MA619824, and MA629824 placed by Marsh Sweden.

The Global Primary Liability is excess only over local US GL of \$5,000,000. The Global Primary Liability Policy #LP0000048395-18 placement was made by Marsh Sweden. Marsh USA Inc. has only acted in the role of a consultant to the client with respect to this placement, which is indicated here for your convenience.

Global Excess General & Products Liability (1st Excess Layer)

Insurer: XL Insurance Company SE

Folicy Number: MA619824 Folicy Term: 10/01/2024 - 09/30/2025

Limit \$25,000,000

Global Excess General & Products Liability Policy #MA619604 is 1st excess over General Liability in excess of \$15,000,000. Global Excess General & Products Liability Policy #MA619624 placement was made by Marsh Sweden. Marsh USA LLC has only acted in the role of a consultant to the client with respect to this placement, which is indicated here for your convenience.

Global Excess General & Products Liability (2nd Excess Layer)

Insurer: HDI Global SE

Policy Number:

MA629624

Policy Term: 10/01/2024 - 09/30/2025

Limit \$10,000,000

Global Excess General & Products Liability Policy #W4625624 is in 2nd excess over General Liability of \$40,000,000. Global Excess General & Products Liability Policy #W6625624 is in 2nd excess over General Liability of \$40,000,000. Global Excess General & Products Liability Policy #W6625624 is in 2nd excess over General Liability of \$40,000,000. MASSISSA placement was made by Marsh Sweden. Marsh USA LLC. It as only acted in the role of a consultant to the client with respect to this placement, which is indicated here for your convenience.

ACORD 101 (2008/01)

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