

FIELD TRIP: EVALUATION FOR APPROVAL FORM

TO BE COMPLETED BY THE STAFF MEMBER REQUESTING APPROVAL

Sch	bool Site: Date:
Sta	ff Member/s Requesting Approval:
Da	te/s of proposed trip: Name of proposed trip:
1.	Nature of the trip/activity?
2.	Purpose of the trip/activity?
3.	What educational value does the trip/activity offer?
4.	How does the trip/activity fall within the district guidelines for sponsorship?
5.	How many students will participate? Grade Level?
6.	How many chaperones will be used? Staff Members?Parent Volunteers?
7.	What types of student involvement will be included in the trip/activity?
8.	What are the hazards and exposures inherent in the trip/activity?
9.	How will transportation be managed?
10.	What types of communication with parents/students/staff will be used?
11.	What will the total cost for the trip/activity be? Cost per student:
12.	How will the costs for the trip/activity be covered?

TO BE COMPLETED BY THE ADMINISTRATOR EVALUATING THE APPROVAL

Consult pages 3-5 of the Field Trip Risk Management Guidelines

Step 1: Determine if the trip/activity is well planned and make sense (pge 3)

Step 2: Determine if the trip meets District requirements and additional considerations (pages 4-5). At a minimum, the following guideline requirements should be met:

a) Is the trip/activity covered by the school district's insurance? Yes _____ No _____ If no, how will

it be insured? _____ Could a less risky trip be substituted? Yes ____ No ____

b) Does the trip/activity need Board/Superintendent approval? Yes ____ No ____ Rec'd: ____

e) Does the transportation comply with Board Policy? Yes _____ No _____

c) Are the permission and transportation forms adequate? Yes _____ No _____

d) Has a Field Trip Emergency Plan been submitted with this request? Yes _____ No _____

Approval Signature: Date:

Denial Signature or Referred To:

(Field Trip Approval Form2010)