

North Marion School District 15

Code: **IICA-AR(2)**
Adopted: 12/09/96

Extended Field Trip Request Form

Date: _____ School: _____

Name of Group Requesting: _____

Staff Member Responsible: _____

Activity and Location: _____

Date of Event: _____ Total Student Participants: _____

Date of Departure: _____ Date of Return: _____

Proposed activities that require students to be away from home overnight should be restricted to special circumstances. Such requests require advance approval of the School Administration, Superintendent, and Board of Directors and will be reviewed in accordance with the procedures outlined in IICAB-AR. This form must be completed and filed with the principal at least one week prior to the Board meeting at which it will be considered.

Please provide, in detail, answers to the following questions. Attach your answers and a copy of the trip itinerary to this form.

1. Has a formal invitation to participate been extended? What is the basis of the invitation of opportunity to participate in the activity?
2. What are the anticipated additional educational benefits to be derived from participation?
3. What is the estimated total cost of the proposed activity? (Attach a proposed budget)
4. How will funding be accomplished? How much of the total cost will be borne by participants? How many fund-raising activities are planned?
5. List the ways that have been considered to raise funds to support the trip.
6. How does this trip relate to instructional goals, or other goals of the school?
7. Does this proposed activity involve loss of school time? Will expense for substitute teachers be involved? Is the activity planned during a period of time usually reserved for family activities?
8. What are the proposed arrangements for travel?
9. What are the proposed arrangements for lodging?
10. What are the proposed arrangements for supervision?
11. How recently has the student organization participated in a similar activity?
12. How are parents going to be informed of trip expectations and itinerary?
13. Has the district's liability been examined by the Business Manager?

Principal's Signature Approved Denied Date _____

Superintendent's Signature Approved Denied Date _____

Board Action Approved Denied Date _____

**Summary Request Form
Extended Field Trip**

School: _____ Date: _____

Name of Organization: _____

Name of Advisor: _____

Ratio of Chaperones to Students: _____

Names of Additional Chaperones: (Use Back)

What is the trip's destination? _____

Purpose? _____

Is the trip a Renewal or A first time activity?

Date of Departure: _____ Return: _____

Transportation Arrangements:

School Bus Other, Explain _____

Cost per Student: \$ _____ Total student participants: _____

Fund Raising Activities? (Explain) _____

Approval Insurance _____

Principal's Signature

Business Manager's Signature