



MOORHEAD
AREA PUBLIC SCHOOLS

Independent School District 152

Probstfield Center for Education

2410 14th St. S., Moorhead, MN 56560 • Fax: 218-284-3333

www.moorheadschoools.org

• Superintendent: 218-284-3330

• Assistant Superintendent: 218-284-3370

• Human Resources: 218-284-3350

Major Magnitude Field Trip Request Form

Administrative Procedure: 632.2

Date Adopted: 1/8/2001

Date Reviewed: 6/8/2015, 6/12/2017

Section: 600 EDUCATION PROGRAMS

Date Revised: 6/8/2015

SECTION I

PRELIMINARY APPROVAL

Field trip request name: _____ Type of trip: Curricular / Co-curricular

Date of request: _____ School Board presentation date: _____

Purpose of trip: _____

Please explain the educational value of the trip and how the trip is related to course content and/or graduation standards: _____

Trip destination: _____

Date of trip departure: _____ Return date: _____

Number of school days involved: _____ Number of students involved: _____

_____ Attached trip itinerary (activities planned, approximate timelines, accommodations, transportation plans);

- _____ Attached accommodation plans for any student with IEP/504 plan;
- _____ Attached funding plans (trip anticipated expenses, approximate cost to the district, student's individual costs and fundraising plans);
- _____ Attached plans for parental notification and approval;
- _____ Attached list of accompanying staff. Number of chaperones needed for the trip: _____

Authorization signature for building administrator: _____

Signature of Superintendent/assistant superintendent of learning and accountability: _____

Board approval date: _____

SECTION II
FINAL TRIP INFORMATION

This request form is to be received by the Superintendent/assistant superintendent of learning and accountability and building administrator at least TWO (2) weeks prior to the date of departure. (Failure to provide this assurance will result in immediate cancellation of the trip. School Board Policy 632).

- _____ 1. Copy of the Major Magnitude Field Trip Request Form Section I with authorized signatures and School Board approval;
- _____ 2. Roster of students going on the trip with signed parental approval;
- _____ 3. List of staff and adult chaperones going on the trip;
- _____ 4. A detailed trip itinerary: transportation plans at destination, hotel/motel accommodations, addresses, phone numbers, places and time lines of activities/events planned;
- _____ 5. An accommodation plan for students with an IEP or 504 plan;
- _____ 6. Trip expenses, district costs, fundraising, and cost of the trip for individual students;
- _____ 7. List of emergency phone numbers where staff/chaperones can be reached in case of an emergency;
- _____ 8. Transportation plans to and from destination: (company, flights, times, costs, schedule, chaperoning, approved district Transportation Request Form (Administrative Procedure 632.1) if needed.

SECTION III
FIELD TRIP EVALUATION

Please complete within three (3) weeks after returning from trip with information based on the statement of educational value and reason for the trip. Send a copy to the building administrator and Superintendent/assistant superintendent of learning and accountability.

Date: _____