



# Independent School District 152



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## Major Magnitude Field Trip Request Form

**Administrative Procedure:** 610.2

**Section:** 600 EDUCATION PROGRAMS

**Date Adopted:** 1/8/2001

**Date Revised:** 08/29/2024

**Date Reviewed:** 08/29/24

### 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 are accommodation plans for any student with an IEP/504 plan;

\_\_\_\_ Attached funding plans (trip anticipated expenses, approximate cost to the district, student's individual costs, and fundraising plans);

\_\_\_\_\_ Attached are 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 teaching and learning: \_\_\_\_\_

Board approval date: \_\_\_\_\_

## **SECTION II**

### **FINAL TRIP INFORMATION**

This request form is to be received by the Superintendent/assistant superintendent of teaching and learning 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 610).

\_\_\_\_\_ 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 the destination, hotel/motel accommodations, addresses, phone numbers, places, and timelines 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 610.1) if needed.

## **SECTION III**

### **FIELD TRIP EVALUATION**

Please complete within three (3) weeks after returning from the 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 teaching and learning.

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Date: \_\_\_\_\_