

## FIELD TRIP CHECKLIST

- \_\_\_\_\_ 1. Bus Request Form given to Sarah Murphy.
- \_\_\_\_\_ 2. List of students GOING and NOT submitted to Sarah Murphy.
- \_\_\_\_\_ 3. What is the plan for student(s) not going to Michelle Truman.
- \_\_\_\_\_ 4. Schools and teachers will be notified in advance of the trip (Sarah Murphy).
- \_\_\_\_\_ 5. Have an Emergency Medical Form for each student going.
- \_\_\_\_\_ 6. Confirm all Permission slips are on file in ONE VIEW two weeks prior to trip.
- \_\_\_\_\_ 7. Field trip form completed and approved by Mr. Clark two weeks prior to trip.
- \_\_\_\_\_ 8. All field trip arrangements have been confirmed 24 hours before the trip.
- \_\_\_\_\_ 9. A student headcount should be taken on bus prior to leaving and returning to ensure no missing students.
- \_\_\_\_\_ 10. Students going on field trip by bus will return by bus, unless personally approved by Mr. Clark.
- \_\_\_\_\_ 11. Specific permission slips must be approved by Mr. Clark for any program.  
(student driving personal vehicle)
- \_\_\_\_\_ 12. All required Purchase Order Requisitions are attached.  
(student driving personal vehicle)
- \_\_\_\_\_ 13. A list of the needed chaperones and chaperone names is attached.
- \_\_\_\_\_ 14. Overnight field trips requested 30 days in advance.
- \_\_\_\_\_ 15. Upon return, submit at least 2-3 photos of the field trip with a brief caption of what is going on in the photo to Mrs. Haubert for social media post

I have read and initial each item on the Field Trip checklist.

Teacher Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## REQUEST FOR FIELD TRIP

TEACHER \_\_\_\_\_ DATE \_\_\_\_\_ SUBSTITUTE NEEDED? Y N

DATE OF TRIP \_\_\_\_\_

PLACE OF VISIT \_\_\_\_\_

CONTACT PERSON AT COMPANY \_\_\_\_\_

IS THIS AN OVERNIGHT FIELD TRIP? Y N

A LIST OF STUDENTS ATTENDING IS PROVIDED ON THE REVERSE SIDE OF THIS FORM ( ATTACH A CLASS ROSTER)

THE TRIP INCLUDES: BREAKFAST      LUNCH      DINNER  
(CIRCLE MEALS PROVIDED)

IS A BUS NEEDED: Y N (Complete attached Bus Request if a bus is needed)

BUS PICK UP/DROP OFF TIMES: PICK UP: \_\_\_\_\_ DROP OFF: \_\_\_\_\_

IS THE BUS NEEDED DURING THE ENTIRE TRIP? Y N

SPECIFIC LEARNING OBJECTIVES TO BE ACCOMPLISHED: \_\_\_\_\_

\_\_\_\_\_

PRE-TRIP ACTIVITIES RELATED TO THE LEARNING OBJECTIVES:

\_\_\_\_\_

\_\_\_\_\_

POST-TRIP ACTIVITIES THAT REINFORCE THE LEARNING OBJECTIVES: \_\_\_\_\_

\_\_\_\_\_

TEACHER'S SIGNATURE \_\_\_\_\_

PRINCIPAL'S SIGNATURE \_\_\_\_\_

SUPERINTENDENT'S SIGNATURE \_\_\_\_\_

FIELD TRIP REQUESTS SHOULD BE SUBMITTED AT LEAST TWO WEEKS PRIOR TO THE TRIP DATE

OVERNIGHT FIELD TRIP REQUESTS SHOULD BE SUBMITTED AT LEAST 30 DAYS PRIOR TO THE TRIP DATE

OVERNIGHT TRIPS MUST BE BOARD APPROVED

REQUISITIONS MUST BE ATTACHED



**FIELD TRIP PERMISSION FOR HALF - DAY STUDENTS**

**Student's Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Today's Date:** \_\_\_\_\_

**I would like to go on a field trip with my Portage Lakes Career Center program on the following**

**date:** \_\_\_\_\_ **I**

**understand that planned tests and classroom activities may prohibit your approval for this trip. If this is the case, I will attend classes as scheduled. I also understand that I am responsible for completing all work missed as a result of this field trip if permission is granted.**



**Student Signature Date**

**Home School Teachers: Please Sign Below: Period**

_____	_____
_____	_____
_____	_____
_____	_____



**HOME SCHOOL PRINCIPAL'S SIGNATURE DATE**

**Student Instructions for Completion of this Form:**

- 1. Have this form signed by your home school teachers and obtain homework assignments**
- 2. Have this form signed by your home school principal**
- 3. Return this signed form with all required signatures to your PLCC program instructor**

**STUDENTS ATTENDING THE FIELD TRIP:**

(Please provide to Michelle Truman your attendance list prior to the field trip)

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**STUDENTS NOT ATTENDING THE FIELD TRIP:**

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PARENT PERMISSION FOR STUDENT TO  
TRANSPORT HIM/HERSELF TO FIELD TRIP LOCATION

I have reviewed the following information and consent child,  
\_\_\_\_\_, to transport  
him/herself to the Portage Lakes Career Center Field /  
Competition Activity.

Purpose of the  
Trip \_\_\_\_\_

Teacher / Chaperone \_\_\_\_\_

Date(s) of the Trip \_\_\_\_\_

Time of the Trip \_\_\_\_\_

Driver of the Vehicle \_\_\_\_\_

Vehicle Description \_\_\_\_\_

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Parent Signature

Date

PARENTAL CONSENT FOR TRANSPORTATION BY PRIVATE VEHICLE

The Parent/Guardian agrees that Portage Lakes Career Center is not liable for the student during transportation to and/or from the field trip experience if the student is transporting him/herself. The parent/guardian will not hold the Career Center liable for any issues that arise during transportation to and/or from the field trip experience.

Purpose of the trip(s) \_\_\_\_\_

Date(s) of the trip(s) \_\_\_\_\_

Time of departure \_\_\_\_\_ Time of Return \_\_\_\_\_

Owner of the Vehicle \_\_\_\_\_

Driver of the vehicle \_\_\_\_\_ Vehicle Description \_\_\_\_\_

Amount of liability insurance on the vehicle \$ \_\_\_\_\_

If driven by a school employee, the school verifies that the driver has a valid driver's license, the vehicle is in proper operating condition, and a safety belt will be available for your child.

I have reviewed the following information and consent to my child driving him/herself or being transported by private vehicle for this purpose.

\_\_\_\_\_  
Parent/Guardian Signature      Date

\_\_\_\_\_  
Student Signature      Date

\_\_\_\_\_  
Instructor/Supervisor Signature      Date

**REQUEST FOR SCHOOL BUS**  
**Please give to Sarah Murphy once you have decided on a Field Trip**

Program/Instructor Requesting Bus

\_\_\_\_\_

Date of Trip \_\_\_\_\_

Destination \_\_\_\_\_

(You will need to provide the bus driver with directions)

Bus Departure Time \_\_\_\_\_ Bus Return Time \_\_\_\_\_

Will the bus be needed at the destination for the entire trip time? \_\_\_\_\_

Total Number of Students and Staff to be Transported \_\_\_\_\_

(Typically one bus will hold 38 – 40 )

Chaperones: \_\_\_\_\_

\_\_\_\_\_

Principal's Approval \_\_\_\_\_

Superintendent's Approval \_\_\_\_\_

\*\* All requests for bus transportation must be approved by the superintendent prior to the date of the trip\*\*