

GILROY UNIFIED SCHOOL DISTRICT

Within the State and Out of State / Overnight Field Trip Request Form

| LEVEL 1 | LEVEL 2 |
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| <i>Within the State / One-Day Trip (District Office information only)</i> | <i>Out of State and/or Overnight Trip (Board Approval required)</i> |
| <p><u>Submit (6) weeks in advance for Principal approval and District Office information.</u></p> <p>Date of Trip: _____</p> <p>Please check: <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/> Sat <input type="checkbox"/> Sun</p> <p><u>DEPARTURE DATE / TIME:</u> _____</p> <p><u>RETURN DATE / TIME:</u> _____</p> <p>Number of Students attending: _____</p> <p>Names of Chaperones <u>mandatory!</u></p> | <p><u>Submit (4) months in advance for BOARD APPROVAL.</u></p> <p>Dates of Trip: _____</p> <p>Number of Days: _____ Please check: <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/> Sat <input type="checkbox"/> Sun</p> <p><u>DEPARTURE DATE / TIME:</u> _____</p> <p><u>RETURN DATE / TIME:</u> _____</p> <p>Number of Students attending: _____</p> <p>Names of Chaperones <u>mandatory!</u></p> |

Date: _____ School Site: _____ Grade Level: _____

Name of Group / Organization: _____

Name of Lead Instructor(s): _____ School Extension: _____

DESTINATION (Location / City / State):

Does the trip involve any water related activities? Yes No

If yes, please describe as additional information/assurances may be required (GUS 67A).

According to GUSD's AR 6153 "Field Trips about trips involving water craft, the use of private and or non-commercial vessels is prohibited.

The teacher must verify the following:

- 1) The vessel must be properly licensed.
- 2) The Captain has a current valid license for the type and size of the vessel.
- 3) The vessel has adequate life jackets for the group.
- 4) The teacher must obtain a certificate of insurance naming the district as an additional insured. (Please attach to Field Trip Request Form #67)
- 5) The teacher must insist that emergency procedures and drills are reviewed by the boat personnel with the filed trip adults and participants.

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- 6) The teacher must review weather conditions and information prior to the trip and be aware of any warnings out.
- 7) The teacher will assign adult chaperons to specific children.
- 8) The teacher must have school's first aid kit.
- 9) The trip shall be accompanied by a teacher, employee or agent of the school who has completed a first aid course which is certified by the American Red Cross

Number of Chaperones attending: Teachers _____ School Staff _____ Parents _____ Community Members: _____

| LIST NAMES OF ALL CHAPERONES |
|--|
| <ul style="list-style-type: none">• Teachers and other school staff: _____ _____• Community Members: _____ _____• Parent/Guardian Name: (Please also include GUSD Student) You may add another sheet, if necessary. _____ _____ _____ _____ |

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| <p>Academic Purpose of Field Trip: (include curriculum and standards met by this field trip below).</p> |
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| <p>Lodging arrangements:</p> |
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MODE of Transportation (please check below):

- School Bus Charter Bus District Vehicle Private Car

If District vehicles or private vehicles are the mode of transportation, please check box below confirming all employees or volunteer drivers have been cleared by the District. All documents must be on file with the Transportation Department or with the Athletic Director at each site.

List Names of Drivers:

| | |
|--|--|
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| | |
| | |

Documents required for clearance include: copy of driver's license, proof of insurance, GUS Form #110 and DMV H6 record

All above documents are on file.


Estimated total cost per student _____

Transportation Costs: Yes No Funding Source: _____

Admission Fees: Yes No Funding Source: _____

Substitute Teacher required? YES If yes, **check one**: full day sub or 1/2 day sub **NO** sub required

Funding Source: _____

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|---|--|
| <i>Within the State / One-Day Trip</i> <i>(Principal Approval only)</i> | <i>Out of State and/or Overnight Trip</i> <i>Board Approval required (*)</i> |
| Signed: _____ <div style="text-align: center; font-size: small;">Principal</div> | Signed: _____ <div style="text-align: center; font-size: small;">Principal</div> |
| Dated: _____ Request approved: Yes [] No [] | Dated: _____ Request approved: Yes [] No [] |
| Date received in Curriculum and Instruction Office: _____ | Signed: _____ <div style="text-align: center; font-size: small;">Director of Curriculum and Instruction</div> |
| Signed: _____ Dated: _____ <div style="text-align: center; font-size: small;">Director of Curriculum and Instruction</div> | Dated: _____ Request approved: Yes [] No [] |
|  <p style="font-size: large; font-weight: bold; margin: 0;">G.U.S.D. BOARD OF EDUCATION</p> <p style="margin: 0;">Approved: [] YES [] NO</p> <p style="margin: 0;">Rationale (if not approved): _____</p> | |