#### STUDENT ACTIVITIES: TRAVEL

### FMG (REGULATION) (EXHIBIT)

See the following pages for exhibits relating to travel regulations:

Exhibit A:	Guidelines for Overnight Student Field Trips – 3 pages
Exhibit B:	Request for Student Trip (Teacher/Sponsor Completes) – 1 page
Exhibit C:	School-Sponsored Trip Information and Permission Slip (Teacher/Sponsor and Parent Complete) – 2 pages (English and Spanish)
Exhibit D:	Request for Post-Activity Student Release (Parent Completes) – 1 page
Exhibit E:	School-Sponsored Trip Information and Permission Slip for Seasonal Activities (Teacher/Sponsor and Parent Complete) – 2 pages
Exhibit F:	Student/Parent Sign-Out Sheet for Trips (Parent Signs) – 1 page
Exhibit G:	Permission for Student/Parent-Provided Transportation (Parent Completes) – 1 page
Exhibit H:	Emergency Medical Treatment Parent Permission (Parent Completes) – 1 page
Exhibit I:	Student Conduct Pledge for Trips Outside of 100 Mile Radius (Student and Parent Complete) – 1 page
Exhibit J:	Overnight Trip Student Assignment/Rooming List
Exhibit K:	Overnight Student Field Trip Department Checklist (Head Teacher/Coach/Sponsor of the Trip must Complete) – 1 page

STUDENT ACTIVITIES: TRAVEL FMG (REGULATION) (EXHIBIT)

EXHIBIT A

Northwest ISD

# **Guidelines for Overnight Student Field Trips**

In order to provide the best possible opportunities for all students to participate in instructionally valuable activities that support and enhance the curriculum, and to ensure safety and accessibility to appropriate activities, Northwest ISD provides Overnight Student Field Trip Guidelines to staff. These guidelines will inform staff of district policies, procedures, and expectations related to overnight student field trips. Accountability and liability must always be considered when transporting students. All campuses will review these guidelines with appropriate staff annually, and all staff will adhere to them explicitly.

### **Purposes of Overnight Student Field Trips**

"The primary purpose of a student field trip is to give students an appropriate educational experience that is not otherwise possible in the classroom setting. Field trips shall have a direct relationship to the instructional activities in the classroom." (Regulation FMG). These trips may serve as an introduction to concepts to be studied or as a culminating activity to finalize instruction regarding specific objectives. Field trips should be used for experiences that cannot be duplicated in the school but are nonetheless an integral part of school instruction. Field trips should foster both individual and collaborative efforts that will strengthen a student's ability to be a successful and productive citizen.

### Instructional Considerations and Pre-trip Planning

Specific planning must occur prior to taking an overnight trip. A department checklist is required and must be submitted to the department director, along with all appropriate forms, prior to approval for the trip. The department checklist is contained in this document. All overnight trips, or trips exceeding the mileage limit as specified in Regulation FMG, must be approved by the campus principal, the appropriate program director, and the Assistant Superintendent for Curriculum and Instruction. The following guidelines must be followed when planning an overnight trip:

### Supervision

Overnight trips require a minimum ratio of one adult to every eight students at the elementary level and one adult to every sixteen students at the secondary level. Exceptions or additional requirements may be made by the campus principal and the appropriate program director. The teacher/coach/sponsor is responsible for appropriate supervision of students on competition and performance event trips. The teacher/coach/sponsor is responsible for acquiring an adequate number of chaperones and school district personnel to supervise students on the trip. All chaperones must have completed a background check/volunteer form (available from the campus office manager) prior to attending a field trip. Parents who are participating as chaperones will have supervisory duties, and therefore, may not bring preschool children and/or other family members on the field trip.

The teacher/coach/sponsor must enforce curfews and conduct room checks throughout the night. A plan must be in place to ensure that hotel halls are actively monitored throughout the overnight hours. Sponsors must use one of the following methods of monitoring the halls throughout the overnight hours:

• Sponsors, teacher, coach, and chaperones taking shifts throughout the night to monitor the hotel halls.

FMG (REGULATION) (EXHIBIT)

• Hiring a security guard through the hotel to monitor the halls throughout the overnight hours. The cost of the security guard must be factored into the overall trip cost.

Co-ed trips are required to have at least one female and one male teacher/coach/sponsor or chaperone. Rooming lists should be assigned by the teacher/coach/sponsor and submitted to the program director at least one week prior to the trip. Boys and girls must stay in separate rooms. Chaperones will not share rooms with secondary students. Exceptions for extenuating circumstances may be considered for approval by the program director. Boys and girls rooms should be spaced apart in the hotel and on different floors when possible. Boys and girls may not share adjoining rooms. It is the responsibility of the sponsor to walk all rooms to ensure rooms are not adjoining.

Chaperones must be assigned to a specific group of students. There must be a chaperone meeting held prior to the trip where specific chaperone duties are outlined by the teacher/coach/sponsor. It is expected that chaperones will understand and accept their roles and responsibilities. Chaperone duties must include monitoring a specific group of students, maintaining phone and contact information of all students, providing students with chaperone phone number and room number, and setting up specific check-in times throughout each day.

#### **Student Eligibility**

As stated in Regulation FMG, each student must satisfy eligibility criteria as outlined by TEA, UIL, and/or District policy in order to participate in a scheduled event. Guidelines regarding eligibility for trips are outlined in Board policy FM and FMF(Local). Teachers/coaches/sponsors are responsible for knowledge of, and compliance with, rules for eligibility and participation in UIL and other events.

#### Medication

Campus Health Coordinators or Athletic Trainers will prepare any medications that need to be sent with students on an overnight trip. At least one staff member on each trip must be AED/CPR certified. Parents/volunteers are not to administer medications to any child, including their own child. If the Health Coordinator or Athletic Trainer is not able to accompany the class on the trip, a designated and trained district staff member, approved by the campus administrator, will administer prescribed medication to any child requiring medication on the trip. The teacher/coach/sponsor should sign a receipt listing all medications and students for which they are intended during the trip. The campus Health Coordinator will copy the daily medication log for appropriate students and send the merged log with the teacher/coach/sponsor on the field trip. Every effort should be made to ensure that trained personnel accompany, or are immediately accessible to, any medically fragile child throughout the trip. All health information is on a "need to know" basis. All necessary forms, including those needed for health and medication purposes, are included in Regulation FMG.

The school Campus Health Coordinator must be notified well in advance of the trip so that medication preparation may be addressed. Medication that has an expired expiration date listed will not be administered to the student. Parents must provide current prescribed medication.

Teachers must ensure that at least one cell phone is taken on a field trip and that the campus office staff has the number for the cell phone. Each teacher taking an additional cell phone should inform the office of the number for his or her phone. Emergency call lists for students should be current. The original copy should remain in the campus office, but the teacher should carry a copy of the list for his or her class.

#### Transportation

When requesting permission for overnight student field trip or travel to a competition, the sponsor/coach and principal/program director will determine the means of transportation based on the purpose of the

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STUDENT ACTIVITIES: TRAVEL FMG (REGULATION) (EXHIBIT)

trip, destination, distance of travel, number of days required for travel and participation, feasibility of cost for travel, and the safety of the students. Early and thorough communication with the transportation department is critical. Numbers of students and adults attending determines the number and type of buses to be used. Special needs students may require particular equipment on buses, such as car seats, wheelchair lifts, or seat belts. Storage concerns for luggage or food also need to be accommodated.

#### Food

The school Cafeteria Manager must be notified well in advance of the trip so that food preparation may be addressed.

#### Travel

As stated in Regulation FMG, students may only be transported in a District-approved vehicle. In unusual circumstances it may be necessary for a parent to transport their own child to a district sponsored event. Parents may not transport children other than their own child. A Request for Post-Activity Student Release and Permission for Student/Parent-Provided Transportation must be turned in prior to the trip by parents requesting to transport their own child(ren) following the conclusion of the trip. Approval by the sponsor and campus principal or designee must be obtained prior to the departure of the group. The student is to participate in the full trip before leaving with a parent.

For optional participation in an event, student, parents, and sponsors must comply with the Optional Participation category in Regulation FMG and FMG (Exhibit G).

Prior to departure, a detailed trip itinerary must be submitted to the department director and campus principal. The itinerary must include the addresses and phone numbers of all hotels.

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STUDENT ACTIVITIES: TRAVEL FMG (REGULATION) (EXHIBIT)

EXHIBIT B

### Northwest Independent School District Request for Student Trip

This form should be completed each time a class or school group, other than athletic groups, requests to leave the school campus. The form should be in the office of the building principal at least two weeks before the requested trip. When the student trip has been approved, a "Request for Transportation" must be processed through the Transportation Department.

Organization/Group		Campus				
Teacher/Sponsor's Name	Destination	Date of Trip				
Time of Departure*	Time of Return*	Number of Students				
Reason for Request (Specify relationship to TEKS – numbers and descriptions, if appropriate)						
Names of Chaperones (a school employe	e must be listed if the sponsor is not attending)					
If this request is for an overnight trip, list t	he last overnight trip made by the organization (inclu	ude destination, year, purpose):				

\*For field trips during the school day, buses cannot leave campus until 9:00 am and must return by 2:00 pm, no exceptions.

	Trip will not be approved without budget code information.				
Registration, membershi	p, or entry fee:				
Budget Code:				\$	
Transportation					
Budget Code:				\$	
Lodging					
Budget Code:				\$	
Food					
Budget Code:				\$	
Miscellaneous					
Budget Code:				\$	
Cost Per	Pupil:		Total Cost:		
				\$	

Teacher/Sponsor's Signature			Date
_			
Dep	artment Head Sig	nature of Approval	Date
		FOR ADMINISTRATIVE USE ONLY	
	Approved	Signature of Principal or Designee	Date
	Denied		
	Approved	Signature of Program Director (if applicable)	Date
	Denied		
	Approved	Signature of Campus Supervisor (Assist. Supt. or Exec. Director for Elementary or	Date
	Denied	Secondary Education)	
1			

Revised: 10-2019

FMG (REGULATION) (EXHIBIT)

EXHIBIT C

#### Northwest Independent School District

# School-Sponsored Trip Information and Permission Slip

As part of our school activities, the following school-sponsored trip has been scheduled:

Organization/Group	Campus	Campus		Teacher/Sponsor's Name		
Destination	Date of Trip	Time of Departure	Time of Return	n Sack Lunch Needed		
				Yes 🗆 No		
Cost of Trip						
Activity: \$ N	/leals (If Applicable): \$	oplicable): \$ Transportation (If Applicable): \$				

In order for a student to be able to participate in the above school-sponsored field trip, written consent from the parent/guardian and a Student Medical/Emergency Information Card must be on file in the school office.

Please note this trip information on your calendar and return the Student Permission Slip. Thank you.

Teacher/Coach/Sponsor's Signature	Date

(Please detach here and return the bottom portion.)

# **Student Permission Slip**

Please Print Student's Last Name	First Name	MI	Teacher/Sponsor
Destination			Date

As the parent of the above-named student, my signature hereby grants permission for him/her to participate in the schoolsponsored trip specified above.

I understand that my child and I are responsible for the cost of his/her meals (unless in the event of a state or national competition).

It is understood that neither Northwest Independent School District, nor any of its trustees, officers, employees, or organization sponsors are liable for any accident or injuries that may occur to the above-named student as a result of any aspect of his/her participation on this trip. I acknowledge that in case of an emergency, illness, or accident an attempt will be made to reach the emergency contact people I have listed below. However, if no one can be reached, I authorize the school officials to take whatever action is deemed necessary in their judgment, for the health of my child. I will be responsible for any costs in the event my child must be transported by ambulance.

\*\*Please note my child has the following allergies/medical conditions and/or is currently taking the following medications:

Emergency Contact	Relationship	Home Phone	Work Phone
		( )	( )
		( )	( )
			()

Printed Name of Parent/Guardian	
Parent/Guardian's Signature	Date

\*\* Please attach EXHIBIT J – Medical Orders for Specialized Health Care Procedures. (Campus Health Clinic will have this on file)

FMG (REGULATION) (EXHIBIT)

EXHIBIT C

#### Northwest Independent School District

# Información y forma de permiso para viajes financiados por la escuela

Como parte de nuestras actividades escolares, el siguiente viaje financiado por la escuela ha sido planeado:

Organización/Grupo		Campus			Nomb	ore de maestro/patro	ocinador	
Destinación		Fecha del viaje	Tiempo de salida	Tiempo de reg	reso	Almuerzo en bolsa	a es necesario	
							Sí □	No
Costo del viaje								
Actividad: \$	Com	nida (Si es aplicable): \$		Transp	ortaci	ón (Si es aplica	able): \$	

Para participar en el viaje financiado por la escuela, el estudiante debe tener consentimiento escrito del padre/tutor y una tarjeta con información médica y datos de emergencia del estudiante tiene que ser archivada en la oficina de la escuela.

Por favor apunte la información sobre el viaje en su calendario y devuelva ésta forma de permiso para el estudiante. Gracias. Firme de maestro/entrenador/patrocinador
Fecha

(Por favor separe aquí y devuelva la parte de abajo.)

# Forma de permiso para el estudiante

Favor de escribir el apellido del estudiante	Primer Nombre	Segundo nombre	Maestro/patrocinador
Destinación			Fecha

Como el padre/tutor del estudiante mencionado arriba, mi firma concede permiso para participar en el viaje financiado por la escuela especificado arriba.

Yo entiendo que mi hijo(a) y yo somos responsables por el costo de su comida (a menos que sea una competencia estatal o nacional).

Es entendido que ni Northwest Independent School District ni ninguno de sus consejeros, oficiales, empleados o patrocinadores de organizaciones son responsables por cualquier accidente o heridas que pudieran ocurrir al estudiante mencionado arriba como resultado de su participación en este viaje. Yo reconozco que, en caso de emergencia, enfermedad o accidente se hará un intento de llamar a las personas en los contactos de emergencia escritos abajo. Sin embargo, si nadie puede ser contactado, yo autorizo a los oficiales de la escuela a tomar cualquier acción que sea considerada necesaria según su juicio para la salud de mi hijo(a). Yo seré responsable por cualquier costo en el caso de que mi hijo(a) necesite ser transportado por ambulancia.

\*\*Por favor note que mi hijo(a) tiene las siguientes alergias/condiciones médicas y/o en este momento está tomando las siguientes medicinas:

Contacto de emergencia	Relación	Número de teléfono principal	Número de teléfono de trabajo	
		( )	( )	
		( )	( )	
		( )	( )	
Nombre del padre/tutor				

\*\* Please attach EXHIBIT J – Medical Orders for Specialized Health Care Procedures. (Campus Health Clinic will have this on file)

Firma del padre/tutor

Fecha

FMG (REGULATION) (EXHIBIT)

EXHIBIT D

Northwest Independent School District

# **Request for Post-Activity Student Release**

Student's Last Name	First Name	Middle Name	Grade Level

As the parent/guardian of the above-named student, I understand that all students are required to ride to and from school-sponsored activities in District-provided transportation according to Regulation FMG. An exception may be granted for a student to be released to the custody of his/her parent at the completion of the activity if a written request is received and approved prior to the trip.

I am hereby requesting that approval be con-	sidered for my child to be released into my cu	stody at the completion of the following activity:
Organization	Destination	Date of Trip
Reason for Request	1	

I understand that, if approval is granted, my child will only be released to me if I am present at the completion of the activity, otherwise he/she will be expected to ride on the District-provided transportation.

Parent/Guardian's Printed Name	Telephone Number
Parent/Guardian's Signature	Date

FOR SCHOOL USE ONLY		
Approved	Signature of Sponsor	Date
Denied		
Approved	Signature of Principal or Designee	Date
Denied		

FMG (REGULATION) (EXHIBIT)

EXHIBIT E

#### Northwest Independent School District

### School-Sponsored Trip Information and Permission Slip for Seasonal Activities

### To Be Completed by Teacher/Coach/Sponsor:

As part of our school activities, the following school-sponsored trip has been scheduled:

Organization/Group	Campus			Teacher/Sponsor's Name		
Destination	Date of Trio	Time of Departure	Time of Return	Sack Lunch Needed		
					Yes 🛛	No
Cost of Trip	·					
Activity: \$	Meals (If Applicable): \$		Transportati	on (If Applicable): \$		

In order for a student to be able to participate in the above school-sponsored field trip, written consent from the parent/guardian and a Student Medical/Emergency Information Card must be on file in the school office.

Please note this trip information on your calendar and return the Student Permission Slip. Thank you.

Teacher/Coach/Sponsor's Signature	Date

### To Be Completed by Parent:

Please Print Student's Last Name Name	First MI	Teacher/Sponsor
Destination		Date

As the parent of the above-named student, my signature hereby grants permission for him/her to participate in the schoolsponsored trip specified above.

I understand that my child and I are responsible for the cost of his/her meals (unless in the event of a state or national competition).

It is understood that neither Northwest Independent School District, nor any of its trustees, officers, employees, or organization sponsors are liable for any accident or injuries that may occur to the above-named student as a result of any aspect of his/her participation on this trip. I acknowledge that in case of an emergency, illness, or accident an attempt will be made to reach the emergency contact people I have listed below. However, if no one can be reached, I authorize the school officials to take whatever action is deemed necessary in their judgment, for the health of my child. I will be responsible for any costs in the event my child must be transported by ambulance.

\*\*Please note my child has the following allergies/medical conditions and/or is currently taking the following medications:

Emergency Contact	Relationship	Home Phone	Work Phone
		( )	( )
		( )	( )
			( )

Parent/Guardian's Signature	Date

\*\* Please attach EXHIBIT J – Medical Orders for Specialized Health Care Procedures. (Campus Health Clinic will have this on file)

EXHIBIT E

### Northwest Independent School District Request for Post-Activity Student Release for Seasonal Activities

### To Be Completed by Parent:

Student's Last Name	First Name	Middle Name	Grade Level	
---------------------	------------	-------------	-------------	--

As the parent/guardian of the above-named student, I understand that all students are required to ride to and from schoolsponsored activities in District-provided transportation according to Regulation FMG. An exception may be granted for a student to be released to the custody of his/her parent at the completion of the activity if a written request is received and approved prior to the trip.

I am hereby requesting that approval be considered for my child to be released into my custody at the completion of the following activity:

Organization	Destination	Date of Trip
Reason for Request		

I understand that, if approval is granted, my child will only be released to me if I am present at the completion of the activity, otherwise he/she will be expected to ride on the District-provided transportation.

Parent/Guardian's Printed Name	Telephone Number
Parent/Guardian's Signature	Date

I agree to sign out \_\_\_\_\_\_ through my child's coach after the competition of each

(Student's Name)

(Seasonal Activity) listed below prior to taking my child home. I expect my child to ride the District-provided

transportation when I am not able to attend.

### Sponsor to list activities:

Date	Destination	Departure Time	Return Time

	FOR SCHOOL USE ONLY	
Approved	Signature of Sponsor	Date
Denied		
Approved	Signature of Principal or Designee	Date
Denied		

FMG (REGULATION) (EXHIBIT)

EXHIBIT F

Northwest Independent School District

# Student/Parent Sign-Out Sheet for Trips

Campus/Organization

Event:	Date:

Parent Name (print)	Child's Name (print)	Parent Signature	Time

FMG (REGULATION) (EXHIBIT)

EXHIBIT G

### Northwest Independent School District

# Permission for Student/Parent-Provided Transportation

Name of Student	Last	First	MI	Grade Level	Home Campus

Students are required to ride to and from all <u>required</u> activities, competitions, and performances in District-provided transportation. In circumstances where participation in an activity, competition, performance, and/or elective course is <u>optional</u>, The District is not required to provide transportation; however, in some cases District-provided transportation may be available or may be required for certain activities by the sponsor. **For optional activities**, **competitions, performances, and/or elective courses only**, a parent may give consent to allow their child to drive to an activity or to arrange another means of transportation, or an adult student (18 years of age) may also choose to drive himself/herself to an activity or to arrange another means of transportation. Written permission for student/parent-provided transportation must be approved and on file with each teacher/sponsor and the campus principal for a student to be allowed any of these privileges.

#### Parent/Guardian Permission

As the parent/legal guardian of the above-named student **or** as the adult student named above, I understand that participation in the activity, competition, performance, and/or elective course checked below is optional, that the above-named student has a valid Texas driver's license, and that he/she has my permission to drive to and from the optional activity/location designated as follows:

Elective Coursework. Specific activity/location:

Extra-curricular activities, including athletics. Specific activity/location:

**Special performances.** Specific activity/location:

Special competitions. Specific activity/location:

**Other.** Specific activity/location:

Student/Vehicle Information				
Texas Driver's License #	Proof of Insurance	License Plate #	Make & Model	Color
	(Attach)			

As the parent/legal guardian of the above-named student **or** as the adult student named above, I understand that participation in the activity, competition, performance, and/or elective course checked below is optional and that District personnel cannot coordinate transportation other than in a school-approved vehicle; therefore, I will arrange my son's/daughter's/own transportation to and from the optional activity/location designated as follows:

Elective Coursework. Specific activity/location: \_

Extra-curricular activities, including athletics. Specific activity/location:

**Special performances.** Specific activity/location:

Special competitions. Specific activity/location:

Other. Specific activity/location:

In addition, I understand that the District's student code of conduct and additional rules established in regard to the activity, competition, performance, and/or elective course checked above will be enforced. Having chosen student/parent-provided transportation, I understand that late arrival(s) could result in my child's removal from the activity. I accept full responsibility in the event of an accident while traveling to or from the above site(s).

 Parent/Guardian/Adult Student Signature
 Date

#### **Student Permission**

I understand that participation in the activity/elective course checked above is optional. I will adhere to all student code of conduct guidelines, as well as any additional rules established in regard to the activity, competition, performance, and/or elective course for which I am participating, including while in transport under the provisions specified above. I also understand that late arrival(s) could result in my removal from participation.

Student's Signature		Date
FOR ADMINISTRATIVE	USE ONLY	
Sponsor's signature	Approved	Date
	Denied	
Principal's signature	Approved	Date
	Denied	
Program Director's signature	Approved	Date
	Denied	

Teacher/Sponsor Original: Student/Parent Copy to:

APPROVED: 10/14/19

FMG (REGULATION) (EXHIBIT)

EXHIBIT H

Northwest Independent School District

## Emergency Medical Treatment Parent Permission (For Day Trips, Overnight Trips, or Trips Outside of 100 Mile Radius)

Student Name:

Date and Activity Involved:

Please provide the following insurance information for your child. In the event of an emergency that requires medical care for your child by an Emergency Care Facility or Hospital, this information will be required.

Name of Insured		
Insured's Employer and Mailing Address		
Name of Insurance Company and Mailing Address		
Insurance Company Phone		
Group #	Policy #	ID #

I grant permission in the event of an emergency requiring medical care beyond what the NISD staff can provide, for NISD Staff Member(s) in supervision at this event to provide or obtain transportation for my child to an emergency medical facility. I understand that NISD is not liable for the cost of emergency transport or for the cost of emergency care and/or subsequent care of my child related to this event.

Parent Signature	Date

FMG (REGULATION) (EXHIBIT)

EXHIBIT I

Northwest Independent School District

### Student Conduct Pledge for Trips Outside of 100 Mile Radius

Student Name:

The following are agreements I have made with my teacher(s)/sponsor(s) concerning my attitude and behavioral actions while participating in this off campus learning opportunity.

- 1. I understand that I am still in school while on this trip. I will cooperatively abide my all regular NISD Student Code of Conduct rules as well as any rules required by the venue which we are visiting. I will show respect to my teachers, group leaders, and employees of establishments we visit, who give me directions to insure my safety and the safety of others.
- 2. I will show respect to myself and my fellow peers by being of help and support to others. I will not harass or enter into altercations with others.
- 3. I shall abide by codes of dress that are appropriate for the activities in which I participate. No clothing will be worn which might be offensive or obscene as defined by NISD Student Code of Conduct or any clothing that might pose a safety hazard.
- 4. I will be prompt to all roll calls, meals, and activities. I agree that my behavior should respect the environment and the objectives of the trip.
- 5. I fully understand that my parent will be contacted to provide transportation home if any behavior or action on my part poses a threat to my own safety, the safety of others, disrupts the instructional program, the employment of others, or results in the destruction of the environment or property in any way.
- 6. I have received and reviewed the NISD Student Code of Conduct.

#### I agree to the terms stated above which have been explained to me by my parent of legal guardian.

Student's Signature	Date
Parent/Guardian Signature	Date

FMG (REGULATION) (EXHIBIT)

EXHIBIT J

Northwest Independent School District

# **Overnight Trip Student Assignment/Rooming List**

Hotel:			Phone:		
Address:					
Coach/Teacher/Chaperone	Room#	Cell#	Coach/Teacher/Chaperone	Room#	Cell#
Student's Name	Room#	Cell#	Student's Name	Room#	Cell#
Coach/Teacher/Chaperone	Room#	Cell#	Coach/Teacher/Chaperone	Room#	Cell#
Student's Name	Room#	Cell#	Student's Name	Room#	Cell#
	100m#	Celi#		10011	Cell#
Coach/Teacher/Chaperone	Room#	Cell#	Coach/Teacher/Chaperone	Room#	Cell#
Student's Name	Room#	Cell#	Student's Name	Room#	Cell#
Coach/Teacher/Chaperone	Room#	Cell#	Coach/Teacher/Chaperone	Room#	Cell#
Student's Name	Room#	Cell#	Student's Name	Room#	Cell#
Coach/Teacher/Chaperone	Room#	Cell#	Coach/Teacher/Chaperone	Room#	Cell#
Student's Name	Room#	Cell#	Student's Name	Room#	Cell#
Coach/Teacher/Chaperone	Room#	Cell#	Coach/Teacher/Chaperone	Room#	Cell#
Student's Name	Room#	Cell#	Student's Name	Room#	Cell#

FMG (REGULATION) (EXHIBIT)

EXHIBIT K

Northwest Independent School District

### **Overnight Student Field Trip Department Checklist**

This document must be submitted to the appropriate Program Director, if not applicable submit to the Executive Director at least one week prior to departure. Each item must be initialed by the head teacher/coach/sponsor of the trip. The head teacher/coach/sponsor of the trip is responsible for ensuring the following procedures are completed.

Request for Student Field Trip form (Regulation FMG, Exhibit B) has been completed, signed, and approved by all necessary district administrators, including appropriate means of travel. (i.e. type of ground transportation, rail, air travel, etc.)
Trip itinerary and rooming lists have been submitted to campus department coordinator and campus principal. All rooming requirements contained in the Northwest ISD Student Overnight Field Trip Guidelines have been followed. Parents have been given a copy of the itinerary. (Attach lists to this checklist)
Chaperone meeting was held on (Date) where chaperone duties were explained and expectations were given.
 All medical procedures and forms contained in the Northwest ISD Overnight Student Field Trip Guidelines (Regulation FMG, Exhibit A) have been followed.
A plan is in place to ensure the halls outside of the student rooms will be monitored in the overnight hours.
All relative trip items have been prepared: Training kits, equipment, meal money, hotel payment, and tax exempt forms
 All necessary trip regulation forms contained in this packet have been, completed, collected, and submitted to the appropriate administrators (Regulation FMG Exhibit).

Head Teacher/Coach/Sponsor Signature	Date