

School District of Janesville  
**FIELD TRIP REQUEST FORM**

Name of Head Teacher/Club Advisor (Trip Leader): \_\_\_\_\_

Date form completed: \_\_\_\_\_ Sub needed:  No  Yes ( All day /  Half day) Field Trip

Request Form must be submitted to Building Principal **at least FOUR weeks prior to trip.**

**Elementary only:** Student/adult chaperone ratio must be no greater than 10 to 1.

**High School only:** If trip is a community service, school sponsored and school supervised activity, complete the "School Sponsored Community Activities" form. **Students who have graduated may not participate.**

\*Extended, Over-night Field Trips out of the State of Wisconsin must go through the SAC approval process per Board Policy 6730. Please see **Extended Field Trip Procedures (Overnight or International Trip)** for complete instructions.

**TRIP INFORMATION**

School: \_\_\_\_\_ Grade(s)/Group: \_\_\_\_\_ Check one:  Class  Club

Field trip to\*: \_\_\_\_\_ City / State: \_\_\_\_\_

**For Overnight/International trips, a SAC proposal must have been submitted and approved. Date of SAC approval** \_\_\_\_\_

How does this field trip extend, supplement or enhance your instructional program? \_\_\_\_\_

\_\_\_\_\_

Departure date: \_\_\_\_\_ Departure time: \_\_\_\_\_

Return date: \_\_\_\_\_ Return time: \_\_\_\_\_

Transportation provided by: \_\_\_\_\_

Number of students participating: \_\_\_\_\_ Cost per student: \_\_\_\_\_

Number of adults participating (total): \_\_\_\_\_

Number of adult non-staff participating (i.e., parents/other chaperones): \_\_\_\_\_

If more than one teacher is participating, list each teacher's name:

\_\_\_\_\_

**MEAL PLANNING (If needed)**

Please notify Food & Nutrition Services at least six (6) working days prior to the field trip if students will be away from school during the lunch period (**Notice of Absence from Lunch Form**).

Food & Nutrition Services requires at least six (6) working days for a field trip lunch order (**Field Trip Lunch Order Form**).

Field Trip Lunch Order Form and Notice of Absence from Lunch Form are found in the Business Services Section of the Administrative Handbook.

**Have meal arrangements been made through Food & Nutrition Services or another offsite vendor?**  Yes  No

**HEALTH INFORMATION (Required)**

**OBTAIN A FIRST AID KIT FROM THE HEALTH ROOM**

For trips to rural areas, identify the nearest hospital or emergency help. \_\_\_\_\_

If there are students who are listed on the Confidential Health List participating, have appropriate arrangements been made for special needs?

Yes  No

Have arrangements been made for children requiring medication?  Yes Initials: \_\_\_\_\_

Medications must be picked up in the office the day of the trip. Upon return, the person dispensing medications to students must share the med log with the health aide/designee to enter into Infinite Campus. Parent volunteers **MAY NOT** dispense medication to students other than their own.

**The nurse's signature below indicates that the nurse and Trip Leader have reviewed the Confidential Health List and Health Plans to determine which students will need scheduled and emergency medications on the field trip, and that emergency medication training has taken place.**

School Nurse Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**APPROVAL**

\_\_\_\_\_  
**Building Principal**

\_\_\_\_\_  
**Date**

**Sub approved:**  Yes  No **PRINCIPAL INITIAL:** \_\_\_\_\_

\_\_\_\_\_  
**Director of Admin/Human Services \***

\_\_\_\_\_  
**Date**

\*Required only if field trip is out of Rock, Dane, Walworth or Waukesha Counties.