

EXTENDED TRIP REQUEST

Send one copy of this form with related material to the Superintendent at least 90 days prior to the intended departure from Warroad.

Title of Proposed Field Trip: _____ School: _____

Name and School of Person in Charge: _____ # of Students: _____

Group Taking Trip: _____ # of Supervisors: _____

Date of Trip: _____ Approximate Cost of Trip: _____

Please attach a statement relative to: (items one through eight)

1. The purpose and educational value of the trip including relationship to learner outcomes. (give rationale and details of the trip.)
2. Background preparation (in class, etc.)
3. Manner of selecting participants.
4. Itinerary: (include details on destination, lodging, and proposed activities.)
 - a. Destination
 - b. Dates of Trip
 - c. Method of Travel to Destination
 - d. Type of Accommodations
 - e. Proposed Daily Activities
 - f. Transportation at Destination
5. Supervision to be provided. (A licensed staff member will be in charge of the trip. Additional adults will accompany the trip as agreed upon by the principal and teacher. The teacher and principal shall agree on the number of chaperones needed. This determination shall take into account student age and the nature of the site and length of the trip.)
6. Explain source of funds and student involvement in raising funds and costs per student.
 - a. How will funds be used to support student with financial needs?
7. What will the impact of this trip be on other teachers and students not participating?
8. How will the trip be evaluated?

Request Submitted By: _____

Building Principal: _____ Approved _____ Not Approved

Principal Signature Date

Superintendent: _____ Approved _____ Not Approved

Superintendent Signature Date

School Board Chair: _____ Approved _____ Not Approved

Board Chair Signature Date