



MIAMI NORLAND SENIOR HIGH OFFICE OF STUDENT ACTIVITIES FIELD TRIP REQUEST COVER SHEET



SPONSOR'S NAME: _____
NAME OF SCHOOL GROUP: _____
DATE OF FIELD TRIP: _____
DESTINATION: _____

The following information must be completed when submitting a Field Trip Request Packet (FM-2431) for approval. This *Checklist* should be completed and **attached as the cover page** for each field trip request packet.

ALL DOCUMENTS WITHIN THE FIELD TRIP REQUEST PACKET MUST BE TYPED.

FIELD TRIP REQUEST PACKET (FM-2431)	COMPLETED	N/A
CHECK ONE THAT APPLIES: 1. <u>In-County</u> (at least TWO weeks prior to the scheduled field trip) <u>Out-of-County</u> (at least THREE weeks prior to the scheduled field trip) <u>Out-of-State</u> (other than athletic events, out-of-state requests are to be submitted by NOVEMBER 14, 2014 ; and out-of-country must be submitted by OCTOBER 31, 2014)		
2. Destination/Address		
3. Dates of Trip (include departure/return time)		
4. Name of School Group		
5. Name of School Group Sponsor/Sponsor's Signature		
6. Number of Students in Group/Number of Students Participating in Trip		
7. Cost to Each Student/Provision for Those Unable to Pay		
8. Means of Funding Trip		
9. # of Teachers/# of Parents/Total # of Chaperones/Additional Personnel* (the adult/student ratio shall be a minimum of 1:15 (secondary) in/out-of-county and 1:10 (elementary) in/out-of-county. Gender equity regarding chaperones for overnight trips is required. * One to One Para, Nurse, Interpreter for the Deaf and Hard of Hearing, etc., are not to be counted as chaperones; however, they are responsible for supervising the student to which they are assigned. Chaperones must be at least 21 years of age and cleared as school volunteers at the level appropriate for the trip.)		
10. Purpose for Trip (include objective; if applicable, attach invitation and itinerary)		
11. Itinerary Attached (FOR OUT OF COUNTY TRIPS)		
12. <u>Transportation</u> (if a private vehicle, provide the name of driver; bus company or airline, provide the name of carrier; if other, specify; valid driver's license verified and by whom?)		
13. <u>Field Trip Roster</u> (name of school, name of school group, destination, date(s) of trip, principal's signature, date, name of student, id #, grade, student address and telephone number)		
14. <u>Field Trip Chaperone and Accessibility Personnel List</u> (name of school, name of school group, date(s) of trip, destination, name of chaperone, phone, volunteer and/or employee #, volunteer level , indicate whether it is a chaperone or accessibility personnel*, sponsor's signature/date and principal's signature/date)		
15. <u>Parent Field Trip Permission Form</u> (school, date, school group sponsor name, name of school group, destination, purpose of the trip, transportation, total number of chaperones, cost to each student and dates of trip)		

FOOD SERVICE MEAL REQUEST (FM-3106)	COMPLETED	N/A
16. Food Service Meal Request (date, room #, teacher, total # of meals, date and time of field trip, student name, id number, choice of milk, a/c #, amt. due, meal received, total amount collected, signature of teacher and signature of food service manager)		
PRIVATE VEHICLE FOR TRANSPORTING STUDENTS (FM-6298)	COMPLETED	N/A
17. Request for Approval to Use Private Vehicle for Transporting Students (complete the packet in its entirety, principal's signature/date and submit with the Field Trip Request Packet. Vehicle must have an operable pair of seat belts for each student-maximum of 8. Attach a copy of the driver's license and insurance information.)		
TRAVEL EXPENSE REPORT BY FACULTY WHEN ACCOMPANYING STUDENTS (FM-0994)	COMPLETED	N/A
18. Travel Expense Report by Faculty When Accompanying Students (employee name, date, employee #, employee's position, work loc.#, school name, description of conference, meeting, etc., reason for travel, location (city/state), travel mode, statement of expenses, traveling employee's signature, funds available certification, treasurer's signature/date and principal's signature/date) – Use only if the employee is being reimbursed.		
WATER RELATED FIELD TRIP PACKET (FM-6614)	COMPLETED	N/A
19. Water Related Field Trip Packet (complete the packet in its entirety; must be reviewed and approved by Risk Management and the adult/student ratio shall be a minimum of 1:5.) Requests must be submitted to the Department of Safety and the Office of Risk Management at least two weeks prior to the trip.		
OTHER/MISCELLANEOUS	COMPLETED	N/A
20. School Bus or Private Bus Invoice (attach FOR OUT OF COUNTY TRIPS ONLY)		
21. Hotel Accommodations for Overnight Field Trips (attach hotel reservation/confirmation)		
22. Airfare Confirmation (Principals: Air travel with students requires a memorandum to Dr. Pablo G. Ortiz, Associate Superintendent, Education Transformation Office (ETO), requesting approval to travel. Assistant Principals: Air travel with students requires approval from the principal, line director and Dr. Pablo G. Ortiz)		
23. Rental Car Confirmation (attach)		
24. Interscholastic Contracts (Performing Groups/Competitions) (attach)		
25. Three Vendors Bids (if the item is not available through Procurement/SAP, identify a minimum of 3 vendors, one of whom should be a certified M/WBE)		
26. Travel Agencies (secure three vendors if applicable (attach)		

Sponsor's Name: _____ Date: _____

FOR OFFICE OF STUDENT ACTIVITIES USE ONLY

Date Received: _____

Field Trip Request Packet Completed: YES _____ NO _____

Date Corrections Returned to School: _____

Reason(s) for Return: _____

Date Corrections Received: _____

FINAL Approval and Date Returned to Activities Office: _____