

SCHOOL TRIPS*Policy Code:* **3320**

School trips designed to stimulate student interest and inquiry may be appropriate classroom extensions and may enhance learning in the classroom. School trips may help meet educational goals and objectives by connecting learning with experiences outside of the classroom environment.

A. AUTHORIZATION OF SCHOOL TRIPS

A school trip occurs when a student or group of students leaves a school campus under the sponsorship of the school and under the supervision of school employees to extend the educational experiences of that student or group. The principal must approve all school trips in advance. School trips that involve an overnight stay must also receive prior approval from the board. To be approved, a school trip must (1) provide an effective method for accomplishing curriculum objectives; (2) be consistent with the educational goals of the board; and (3) keep to a minimum any disruptions of other educational programs and/or loss of instructional time. The superintendent shall develop additional procedures for the request and approval of school trips.

B. COSTS

Students must not be charged a fee for any required school trip for which credit is granted or that is necessary for participation in interscholastic sports. The board may impose fees for other non-required school trips. Any fees imposed for school trips will be waived or reduced for students who demonstrate real economic hardship. The superintendent shall establish procedures to review requests for fee waivers or reductions and to notify students and parents of the availability of and the process for requesting a waiver or reduction of fees.

C. STUDENT SAFETY AND DISCIPLINE

Policy 1510/4200, Student Safety, and the student behavior policies in the 4300 series apply to all students, school employees and volunteers while they are taking part in school trips.

D. TRANSPORTATION

Policy 6320, Use of Student Transportation Services, applies to the use of vehicles for all school trips.

E. CHAPERONES AND VOLUNTEERS

All chaperones and volunteers accompanying students on school trips must meet the standards established by policy 5015, School Volunteers.

SCHOOL TRIPS

Policy Code: **3320A**

Legal References: G.S. 115C-47, -288, -307

Cross References: Student Safety (policy 1510/4200), Goals and Objectives of the Educational Program (policy 3000), Student Behavior Policies (4300 series), Student Fees (policy 4600), School Volunteers (policy 5015), Use of Student Transportation Services (policy 6320)

Adopted: August 30, 1999; Revised: October 3, 2005; Revised: June 02, 2008; Revised: April 09, 2009

SUBJECT: FIELD TRIPS AND NON-SCHOOL SPONSORED TOURS

School trips designed to stimulate student interest, inquiry, and provide opportunities for educational growth and development can be appropriate extensions of the classroom. To the extent that a trip provides the single most effective means for accomplishing the objectives of the curriculum and that disruption of other classes is kept to a minimum, it may be approved. Criteria for assessing the advisability of a proposed trip should include the extent to which other instructional programs are disrupted, the amount of school time lost, and what additional demands are placed upon student time in order to raise funds to finance the trip.

- A school trip is defined as a student or group of students leaving a school campus under the sponsorship of the school and under supervision of school employee(s) to extend educational experiences consistent with the general goals and objectives of the total school program. A school trip must be related to the curriculum of the school or to a co-curricular activity (e.g., clubs, student council).
- The principal shall establish a process for approving field trip requests. The process should ensure that all such trips are an integral part of the curriculum and that loss of school time is kept to a minimum. The outcome of this process should allow for input from all members of a school staff who are affected by such trips.
- Approval of overnight and out-of-state trips shall require that these additional criteria be met:
 - a. The school advisory council must approve all field trips. School advisory council minutes with chairperson's signature and date must be included.
 - b. Groups including ten or more male and female students shall have male and female chaperones.
 - c. School trips to amusement parks are discouraged.
 - d. The supervising teacher(s) must hold an orientation meeting of students, parents, and chaperones prior to the educational trip and review the Wayne County Public Schools' Policy No. 3320-School Trips and field trip guidelines and provide them with copies of the documents.
 - e. All proper documentation must be submitted and approved in writing by the principal and, if applicable, by the superintendent or assistant superintendent designated by the superintendent two weeks prior to the field trip. Appropriate student and parent documentation for athletes are required to be on file ten (10) days after the beginning of each season with each high school athletic director and each individual head coach as required by the North Carolina High School Athletic Association and North Carolina Department of Public Instruction.
- Student school accident insurance must be in force on each student or parent statement in writing certifying that the student is covered under a separate insurance policy.

- When privately-owned vehicles are to be used for transporting students, parents of the students are to be notified and the owner of the vehicles and the parents must acknowledge in writing that they have received notice that the Board's liability insurance does not cover the use of private vehicles to transport students for school activities. **Chaperones who drive must provide proof of liability insurance coverage with minimum coverage limits in the amount of \$100,000/\$300,000 for personal injury and \$50,000 for property damage.**
- Students should not be charged a fee for any required class school trip for which credit is granted. All assessments for voluntary class or co-curricular school trips shall be closely scrutinized at the time the trip is approved. The sponsor of that trip must certify to the school principal that provisions have been made for group members unable to pay the assessment.
- The supervising teacher(s) must provide students, parents, and chaperones a copy of Wayne County Public Schools' Policy No. 3320 – School Trips and field trip guidelines prior to the education trip.
- Supervising teachers/chaperones must sign a Chaperone Contract.
- Students and parents must complete permission forms with appropriate medical information and emergency contact information in order to disclose information to proper medical and law enforcement authorities.
- Students, parents, chaperones, and supervising teachers must agree to follow all local, state, and national guidelines of the sponsoring organization(s).
- The following guidelines for swimming and aquatic activities will be adhered to:
 - a. Parents must sign a field trip permission form giving the student permission to swim or participate in other aquatic activities while on the field trip and must indicate if the student is able to swim.
 - b. Participation in swimming or other aquatic activities will be allowed only if a certified Red Cross lifeguard is present. Swimming in the ocean will not be allowed.
 - c. Chaperones and the supervising teacher(s) must also be present with an appropriate ratio of adults to swimmers and students participating in aquatic activities. The minimum number is two adult chaperones for the first ten students and one chaperone for each ten students or less thereafter. This is in addition to the certified Red Cross lifeguard.
 - d. The students must adhere to rules of the sponsoring organization and management facility, as well as local, state, and national laws while participating in an aquatic activity.

- Parents must give written authorization to the supervising teacher(s) to sign any medical release forms that may be necessary for the students to receive proper medical attention while on the field trip.
- Students will be under the supervision of an adult chaperone at all times.
- Failure to complete and sign the Field Trip Parent/Guardian Permission Form and any other applicable forms will disqualify the student from participating in field trips.

Issued: August 30, 1999; Revised: August 24, 2005, October 7, 2005, December 12, 2005;
Revised: June 02, 2008

Wayne County Public Schools
Request For Overnight or Out-of-State Field Trips

1. School_____
 2. Name of Participating Group_____
 3. Proposed Field Trip _____
 4. Objectives: (Check All That Apply)
Instructional_____ Competition_____ Invited to Participate_____
 5. Level: Local_____ District/Regional_____ State_____ National_____
(Check all that apply)
 6. Destination:_____
 7. Proposed Dates/Times: Departure Date:_____ Departure Time:_____
Return Date:_____ Return Time:_____
 8. Number of School Days Missed:_____
 9. Travel:
Private Car_____ Activity Bus_____ WCPS Car_____ *Motorcoach_____
Airplane_____ Name of Airline_____
 - *Name of Motorcoach Company_____
 - * (Must be on Current Approved WCPS List)
 10. Accommodations: (Check All That Apply)
Hotel___ Camp___ Institution___ Private Home_____
List Name(s):_____
 11. Name(s) of Supervising Teacher(s) In Charge of Trip:

 12. Number of Chaperones (Including teachers) _____ Number of Students _____
 13. Anticipated Cost of Trip per Student _____ Amount Financed by Individual Student_____
What provisions are planned for students unable to pay their share of the expense?

- How Will Trip Be Financed? _____
- Will Financial Assistance Be Requested From The Board of Education? Yes_____ No_____
- If Yes, Please Explain_____

14. Date Approved by Advisory Council: _____
(Attach Minutes with Advisory Chairperson's Signature)

15. Parental Permission Secured: Yes _____ No _____

Requesting Teachers: _____ Date: _____
_____ Date: _____

Approved by Principal: _____ Date: _____

**School Trip Forms
Checklist for Required Attachments
(please send in the order listed)**

_____ **Alphabetical listing of Students, Supervising Teachers, and Chaperones**
Number of students, number of teachers, number of chaperones

_____ **Advisory Council Minutes with Advisory Chairperson's Signature/Date**

_____ **Field Trip Itinerary**

_____ **Sponsoring Organization's Guidelines or school's code of conduct for trips**

_____ **Chaperone Contracts (this includes supervising teacher)**
Must have date, time and place of meeting and must be signed by the supervising teacher and principal

_____ **Supervising Teachers/Chaperones who Drive**
Must provide copy of liability insurance coverage with minimum coverage limits in the amount of \$100,000/\$300,000 for personal injury and \$50,000 for property damage

_____ **Alphabetical listing of Student Names**
_____ Field Trip Parent/Guardian Permission Form for all students
_____ List medical insurance company and number. **If no medical insurance coverage please check the appropriate statement**
_____ Parent Permission for Students Riding in Private Vehicles (this includes parents transporting their child)

Director _____ **Date** _____
(Central Office)

Action by Associate/Assistant Superintendent or Designee Approved _____ Not Approved _____
_____ **Date:** _____

Signature of Associate/Assistant Superintendent or Designee

Action by Board of Education, if required: Approved _____ Not Approved _____ Date _____

SUPERVISING TEACHER/CHAPERONE CONTRACT

Name of Field Trip: _____

Dates of Field Trip: _____

1. I agree to perform all duties as a Chaperone as directed by the supervising teacher(s).
2. I understand that supervising teacher(s)/chaperones are on duty 24 hours/day for the duration of the trip.
3. Chaperones are expected to assist the Supervising Teacher(s) and enforce all rules and regulations of the school, Board of Education, and/or other sponsoring institution for the field trip. Chaperones are not expected to perform as the Supervising Teacher(s), but will be included in meetings and in the dissemination of information.
4. I have been provided a copy of Wayne County Public Schools Policy 3320 - School Trips and understand the rules and regulations contained herein.
5. Chaperones will be required to pay for meals and travel expenses, unless otherwise indicated.
6. I have attended the orientation meeting of supervising teachers, students, parents, and chaperones indicated below:

Date of Meeting _____ **Time** _____ **Place** _____

NAME OF CHAPERONE (please print)

CHAPERONE SIGNATURE

DATE

ADDRESS

CELL NUMBER

MEDICATIONS CHAPERONE IS ALLERGIC TO _____

NAME OF EMERGENCY CONTACT

TELEPHONE NUMBER

SIGNATURE OF SUPERVISING TEACHER

DATE

PRINCIPAL APPROVAL

DATE

**WAYNE COUNTY PUBLIC SCHOOLS
CHAPERONE/SUPERVISING TEACHER
PROOF OF INSURANCE
(DRIVING PERSONAL VEHICLE)**

I, _____, understand that by transporting
Name of Chaperone

students in my personal vehicle on a school-sponsored trip, I assume responsibility for the safety of the students and that I have adequate vehicle insurance. I also understand that the Wayne County Board of Education's liability insurance does not cover the use of private vehicles to transport students for school activities. The name of my insurance company is _____ with policy number
Name of Insurance Company

_____, with primary coverage being as shown on the attached
Policy Number

Proof of Insurance. (Attach a copy of liability insurance coverage with minimum coverage limits in the amount of \$100,000/\$300,000 for personal injury and \$50,000 for property damage).

Chaperone Signature (Parent or Supervising Teacher Driving)

Date

**WAYNE COUNTY PUBLIC SCHOOLS
PERMISSION FOR CHAPERONES
RIDING IN PRIVATE VEHICLES**

I, _____, will be traveling in a personal vehicle owned and/or
Name of Chaperone

operated by _____ while participating in _____
(Chaperone/Supervising Teacher)

_____ on _____
Name of Field Trip Date(s) of Trip

I understand that the Wayne County Board of Education’s liability insurance does not cover the use of private vehicles to transport students/chaperones for school activities. In the event of an accident resulting in injury to me while a passenger in said vehicle, I understand that any applicable insurance coverage would be provided by the owner and/or operator of the vehicle or a third party and not the Wayne County Board of Education.

Chaperone Signature

Date

Wayne County Public Schools
Field Trip Parent/Guardian Permission Form

PLEASE PRINT CLEARLY (black/blue ink)

NAME OF FIELD TRIP _____

DATES OF FIELD TRIP _____ SCHOOL _____

PARTICIPANT NAME _____ Age _____ M _____ F _____
(Please use correct name and list one child only)

PARENT NAME/LEGAL GUARDIAN _____
(Name must be the same in all places requiring parent/legal guardian signature)

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE NUMBER (Home) _____ (Work) _____ (Cell) _____

SECONDARY PERSON TO NOTIFY _____

SECONDARY TELEPHONE NUMBER (Home) _____ (Work) _____ (Cell) _____

RELATIONSHIP _____

MEDICAL CONDITIONS OF PARTICIPANT _____

MEDICATIONS PARTICIPANT IS ALLERGIC TO _____

MEDICATIONS STUDENT IS TAKING _____

PARENTAL PERMISSION

I understand that the Wayne County Board of Education does not carry any health, accident, or other similar insurance for students involved in field trips and that the Board of Education assumes no liability for any such medical expenses. Based on this understanding, I certify as follows:

My child is covered by:

() School Accident Insurance: 20__ school year Policy/Claim # _____

() Military Insurance name: _____ Policy/Claim # _____
(if social security #-last 4 digits)

() Private Insurance name: _____ Policy/Claim # _____

() Medicaid # _____

() My student has no medical insurance coverage and I agree to be fully responsible for all uninsured expenses for medical services and treatment resulting from any accident or injury during the field trip.

(Must complete)

REGARDING SWIMMING/AQUATIC ACTIVITIES

APPLICABLE _____

NOT APPLICABLE _____

CHECK THOSE THAT APPLY

(Yes) _____ Participant can swim

_____ **Participant has my permission to swim** and participate in other aquatic activities.
Swimming in the ocean will not be allowed.

(No) _____ Participant cannot swim

_____ **Participant DOES NOT** have my permission to swim and participate in other aquatic activities.

Is there an aquatic activity that you do not want your child to participate in? Yes _____ No _____

If so what? _____

Please check the appropriate statement below:

_____ **I GRANT PERMISSION** for my child, _____ (name), to participate in the planned school field trip named above. As the custodial parent, I hereby give permission for my child to receive proper medical attention while on this trip, and authorize the supervising teacher(s) (names of teachers) _____ to do any acts and give any required consents which may be necessary or proper to provide for the health care of my child/children at any hospital or other institution by any physician, dentist, nurse, or other person whose services may be needed for such health care. This consent to provide health care shall be effective with the date the field trip commences and extend through the last day of the trip.

_____ **I DO NOT GRANT PERMISSION FOR MY CHILD,** _____ (name), to participate in the planned school field trip as described in the attached information.

Students failing to adhere to the rules will have their parents notified to come to pick them up.

Parent/Legal Guardian _____ (please print)

(Name must be the same in all places requiring parent/legal guardian signature)

(Signature)

Date

**WAYNE COUNTY PUBLIC SCHOOLS
PARENT PERMISSION FOR STUDENTS
RIDING IN PRIVATE VEHICLES**

I, _____, understand that my child,
(Name must be the same in all places requiring parent/legal guardian signature)

_____, will be traveling in a personal
Name of Son/Daughter

vehicle owned and/or operated by _____ while
(Supervising Teacher/Chaperone)

participating in _____
Name of Field Trip

on _____.
Date(s) of Trip

I also understand that the Wayne County Board of Education’s liability insurance does not cover the use of private vehicles to transport students for school activities. In the event of an accident resulting in injury to my child while a passenger in said vehicle, I understand that any applicable insurance coverage would be provided by the owner and/or operator of the vehicle or a third party and not the Wayne County Board of Education.

Parent/Legal Guardian _____ (please print)
(Name must be the same in all places requiring parent/legal guardian signature)

(Signature)

(Date)

WAYNE COUNTY PUBLIC SCHOOLS
Parent Permission for Transporting Child from Field Trip

At this point in which the _____ field trip on
(name of field trip)

_____ ends for my child, upon departure from
(date)

_____, I relinquish the Wayne County Public Schools
(place of field trip)

System of all responsibility for my child's safety and well being. My child

will not be riding the charter bus back to the designated starting point

_____ for this field trip because I am taking my child
(school)

home with me in my personal vehicle.

Child's Name _____

Parent/Guardian Name _____ **(please print)**
(Name must be the same in all places requiring parent/legal guardian signature)

Parent/Guardian Signature _____ (Date) _____

Teacher's Signature _____ (Date) _____