



POLICY 2.40

5-H I recommend that the Board approve development of the proposed **revised** Policy 2.40, entitled "Field Trips".

[Contact: Denise Doyle, PX 48848.]

Development

CONSENT ITEM

- The purpose of this policy is to set forth standards relating to school sponsored field trips. This policy addresses limitations for scheduling field trips and the procedures for obtaining School District approval, parental permission and approval of chaperones as well as provisions for students' safety, security procedures and transportation alternatives and conditions. Moreover, the policy distinguishes school trips from non-school sponsored trips.
- This revision also updates statutory references and incorporates several field trip related forms.

POLICY 2.40

FIELD TRIPS

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3 1. Purpose. The purpose of this policy is to set forth standards relating to school
4 sponsored field trips. This policy addresses limitations for scheduling field trips and
5 the procedures for obtaining School District approval, parental permission and
6 approval of chaperones as well as provisions for students' safety, security
7 procedures and transportation alternatives and conditions. Moreover, the policy
8 distinguishes school trips from non-school sponsored trips.
- 9 2. Limitation of Field Trips
 - 10 a. Pupils Students making up the membership of a course of instruction, group of
11 such courses, school organization, school extracurricular activity, or affiliated
12 school organization, shall be permitted to take trips which enhance learning.
 - 13 b. Field trips in or out of the county ~~country~~ should not negatively impact the
14 student's regular instructional program.
- 15 3. Approval of Field Trips
 - 16 a. PBSD 1894, the Field Trip/Activity Planning Report and Approval Request
17 must be completed and approved for each field trip. No money is to be raised,
18 plans for trips made, or contracts signed until proper approval has been
19 received. All field trips shall be recorded on the school's calendar with the
20 required documents on file at the site.
 - 21 b. In-county field trips – All in-county field trips require the principal's approval
22 and shall be recorded on the school's calendar.
 - 23 c. Out-of-county field trips – Groups planning a ~~function~~ trip that will take the
24 group beyond the boundaries of Palm Beach County must obtain approval of
25 the principal, and the area superintendent or designee.
 - 26 d. Out-of-state field trips – Groups planning a trip that will take the group beyond
27 the boundaries of Florida must obtain approval of the principal, the area
28 superintendent or designee, Chief Academic Officer, Chief Operating Officer
29 or Chief of Staff.
 - 30 e. Out-of-country or overseas trips – Groups planning a trip to a foreign country
31 or any overseas location must obtain prior approval of the principal,
32 superintendent and school board.
 - 33 i. The principal will ensure that at the time the trip is planned there are no

- 34 travel restrictions or concerns in the area to be visited.
- 35 ii. Immediately prior to departure of the students, the principal will review the
36 State Department website for the alerts on unsafe travel conditions.
- 37 iii. Further, foreign travel activities must include trip cancellation/interruption
38 insurance which will become effective should circumstances warrant
39 School Board action to cancel or interrupt the trip due to activities in the
40 area.

41 4. Safety and Security of Pupils Students for School Sponsored Field Trips

42 a. Principals shall ensure that all groups going on field trips have sufficient
43 chaperones to ensure monitor each student's safety and to meet address the
44 student's personal health and security needs.

45 b. Chaperones shall be notified by the school that they are required to adhere to
46 all rules that are followed by School Board employees at all times on the trip
47 and be provided, at a minimum, a brief training session as to their authority.
48 Once approved as a chaperone, the person must register online as a
49 volunteer, (unless the person has already registered as a volunteer for that
50 school year), to ensure clearance prior to the trip pursuant to the District's
51 procedures. A field trip activity roster, PBS Form 2149 must be completed.
52 Field trips shall not be authorized unless each student authorized to attend
53 has the maturity and the skills necessary to participate safely and meaningfully
54 in the activity. Only school-approved persons, including but not limited to
55 students, school staff, parents or other persons assisting a particular
56 student(s), and approved chaperones are allowed to travel with the field trip.
57 Withholding of approval may be based on safety concerns and other good
58 cause factors, but must be compliant with sub-paragraph 4(c) below.

59 c. ESE and 504 Accommodations

60 i. Principals ~~should~~ shall make reasonable provisions for ESE handicapped
61 students and students with a 504 Plan to participate in field trip activities.
62 Federal and State law guarantees that each student with a disability must
63 have an equal opportunity to participate in all extra-curricular activities,
64 including field trips, assuming the student is otherwise qualified to
65 participate.

66 ii. At the time the principal requests transportation services, on the
67 appropriate Mainframe CICS TR71 panel, prior to the field trip, which
68 shall occur as per Policy 2.404 at least two weeks prior to the day of the
69 trip, the principal shall have determined if any of the students to be
70 transported have special transportation needs or accommodations, as
71 specified in their current individualized education program (IEP) or

- 72 Section 504 Plan. As examples, students may need a specially adapted
73 bus to safely transport a wheelchair, special restraint harness, preferential
74 seating, or have diet restrictions.
- 75 iii. The principal shall communicate any student's identified special
76 transportation needs or accommodations to the District's Transportation
77 Department on the appropriate Mainframe CICS TR71 panel and ensure
78 that appropriate transportation will be available to serve each student
79 scheduled to travel on the field trip.
- 80 iv. The principal shall also communicate on the appropriate Mainframe CICS
81 TR71 panel to the District's ESE Department the funding request to meet
82 any student's identified special transportation needs or accommodations,
83 and the funding must be approved by the ESE Director/designee.
- 84 v. Before the field trip commences, the bus driver(s) must receive a copy of
85 any special service or accommodations the driver(s) is responsible for
86 implementing. The school must ensure the bus driver understands the
87 special service or accommodations and is capable of implementing them.
88 The school must obtain a signed release of information form from the
89 parents prior to the school sharing any disability information with the bus
90 driver(s).
- 91 d. Any Hhealth, safety or security problems which arise as a result of a field trip
92 shall be reported immediately to the Principal. If there is an accident, the
93 principal/designee shall immediately complete a Student/Visitor Accident
94 Report (PBSD 0335). This includes identifying any witnesses and identifying
95 and preserving any other pertinent information and may include obtaining
96 and/or taking photographs, if possible. For any accidents where injury results
97 in medical care at a hospital or by a physician, the principal/designee shall
98 promptly submit this report to the Risk Management Department. The
99 principal will report these problems to the Area Superintendent. The District's
100 Third Party Administrator department shall conduct an immediate and
101 thorough investigation of catastrophic occurrences and for other accidents will
102 conduct the investigation when a notice of claim is made.
- 103 e. Students may be transported to and from field trips in a school bus , whenever
104 practical, or other vehicles, such as chartered buses and public transportation,
105 to the extent authorized by Fla. Stat. § 1006.22.
- 106 f. Students may also be transported in School District passenger cars or
107 multipurpose passenger vehicles or trucks if this motor vehicle is designed to
108 transport fewer than ten (10) persons which meet all federal motor vehicle
109 safety standards for passenger cars and the standards within Fla. Stat. §
110 1006.22. Students must be transported in designated seating positions and

111 must use the occupant crash protection systems provided by the manufacturer
112 unless the student's physical condition prohibits such use. The School Board's
113 tort liability for use of motor vehicles owned, maintained, operated or used by
114 the School District is governed by the provisions within Fla. Stat. §
115 1006.24(1).Violations of sub-paragraphs (4)(e) or (f) of this Policy may subject
116 an employee to disciplinary action.

117 g. Students may be transported to and from field trips in privately owned motor
118 vehicles on a case by case basis as allowed only in the circumstances
119 described within Fla. Stat. § 1006. 22(2). This method of transportation would
120 be allowed if transportation is not available, as a practical matter, using a
121 school bus or School District passenger car. Parents shall be notified in
122 advance of and consent in writing to the intended use of a private vehicle.
123 Volunteer drivers must complete and execute PBSD 2362 and carry the
124 required insurance. This motor vehicle must be designed to transport fewer
125 than ten (10) persons which meet all federal motor vehicle safety standards for
126 passenger cars and the standards within Fla. Stat. § 1006.22. Students must
127 be transported in designated seating positions and must use the-occupant
128 crash protection systems provided by the manufacturer unless the student's
129 physical condition prohibits such use. Tort liability for use of private motor
130 vehicles approved for use on field trips is governed by the provisions within
131 Fla. Stat. § 1006.24(1) and 1006.22(3).

132 h. Notwithstanding the transportation provisions stated above in sub-paragraphs
133 4 (e),(f), and (g), in an emergency situation constituting an imminent threat to
134 the student's health or safety, school personnel may take whatever steps are
135 necessary under the circumstances to protect the student's health and safety.

136 5. Parent/Guardian/Emancipated Student Permission Slips and Consent Forms

137 a. A student's Pparents or Guardian or an Emancipated Student shall be notified
138 prior to any trip that the trip is contemplated. The notice shall give the place to
139 be visited, the date, the time of departure and the estimated time of return to
140 the school. A field trip Regular permission form, PBSD 0755, covering each
141 student must be slips signed by the parent(s)/guardian covering each child
142 covering each student, although if the student is emancipated as defined
143 within School Board Policy 5.072, the student's signature shall be required and
144 alone is sufficient.

145 b. If in an unusual circumstance a parent/guardian requests to take the student to
146 the location of the field trip or to return the student from a field trip, it is within
147 the principal's discretion, based on safety and disruption factors and the
148 location(s), of the trip, whether to grant permission to the parent/guardian's
149 request. If permission is granted, it is contingent on the parent/guardian
150 signing and agreeing to the terms within the consent and release form to the

151 School District as provided in PBSB 2360.

152 6. Financing Field Trips

153 Arrangements for payment of expenses incurred by individual students, student
154 groups and their chaperones on school related trips shall be the responsibility of
155 the appropriate personnel in the involved school. All such arrangements shall have
156 prior approval of the school principal and others as may be required under
157 appropriate policy. Payments for field trips may include funds from fundraising
158 (pursuant to School Board Policy 2.16) and shall be in compliance with School
159 Board Policy 2.21.

160 7. Non-school sponsored trips

161 Chaperones/organizers of trips by groups of students planning to travel under the
162 auspices of an individual or non-school agency must advise parents/guardians and
163 emancipated students in writing that the travel is neither authorized nor sponsored
164 by the school.

165 Principals should not permit recruiting of student travelers, or planning activities
166 during regular school hours. School employees, acting as individuals, may be
167 permitted to meet prospective student travelers during non-school hours on school
168 premises by following the regular procedures for lease of facilities by outside
169 agencies.

170 Under no circumstances may school activity accounts (internal accounts) be used
171 as a depository/disbursement source for funds for non-school sponsored trips.

172 8. Forms

173 All forms mentioned within this Policy are incorporated herein by reference as part
174 of this Policy and can be found on the District website for forms at:
175 <http://www.palmbeach.k12.fl.us/Records/FormSearch.asp>.

176 STATUTORY AUTHORITY: Fla. Stat. §§ 1001.32(2); 1001.41(2); 1001.42(26);
177 1001.43(1) 230.22; 230.23(8)

178 LAWS IMPLEMENTED: Fla. Stat. §§ 1001.32(2); 1001.42 (8), (10) & (12); 1001.43(1),
179 (3) & (5); 1006.22 230.22(2)

180 HISTORY: 6/12/74; 7/18/79; 7/21/82; 1/22/92 __/___ 2010

Legal Signoff:

The Legal Department has reviewed proposed Policy 2.40 and finds it legally sufficient for development by the Board.

Attorney

Date



THE SCHOOL DISTRICT OF PALM BEACH COUNTY
**Field Trip/Activity Planning Report and
 Approval Request**

Approved **Not Approved**
Signatures required for approvals

Complete this request to receive approval for a field trip or school activity. (See Board Polices [2.40](#) and [2.404](#))

SCHOOL	SCHOOL #	TRIP SPONSOR	
CLUB OR GROUP		DATE OF REQUEST	TRIP SPONSOR TELEPHONE
ACTIVITY OR FIELD TRIP		ACTIVITY CITY AND STATE	
PURPOSE OF ACTIVITY OR TRIP			
DESCRIBE ACTIVITY OR TRIP			
TRIP/ACTIVITY BEGINNING DATE	TRIP/ACTIVITY BEGINNING TIME : <input type="checkbox"/> AM <input type="checkbox"/> PM	TRIP/ACTIVITY END OR RETURN DATE	TRIP/ACTIVITY END OR RETURN TIME : <input type="checkbox"/> AM <input type="checkbox"/> PM

FUNDING INFORMATION

No penalty of any type will be imposed against the student based upon a failure to pay. No student shall be denied the right to participate for failure to pay. The principal may forgo a planned activity or use of a particular item based upon the collection of insufficient funds to cover the cost of the item or activity.

Indicate the estimated cost of the following items on the lines provided:

- 1. Admission/registration _____
- 2. Transportation _____
- 3. Meals _____
- 4. Lodging _____
- 5. Enrichment Activity _____
- 6. Other Fees _____

Funding Source Budget Internal Accounts

Total estimated costs

ITINERARY

Provide a complete detailed itinerary including times and location. Use approximate time if unsure of exact time. If applicable list all probable stops including meals. (Example: 8:00 A.M. Bus leaves school parking lot; two hour travel time on bus , no stops; 10:00 A.M. arrives Disney world, ...) Approval will be based upon this sequential schedule. There can be no additional stops added without prior approval unless an emergency occurs. Parents must be aware of this schedule when their permission is obtained. Attach additional sheets if necessary.

TIME	ACTIVITY

Field Trip/Activity Request and Planning Packet continued

ACTIVITY OR FIELD TRIP	SCHOOL NUMBER
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CHAPERONES

All groups going on field trips are required to have sufficient chaperones to ensure each student's safety and to meet the student's personal health and security needs. All chaperones must have a completed and approved *School Volunteer On-Line Application* on record at the school prior to the event (see the School Volunteer Coordinator). Provide a description of circumstances or times that the students will NOT be supervised by school staff or parents although adult supervisors will be present. (EXAMPLE: *When students are on the rides at Disney World they will be treated and will be subject to the same level of supervision by the Disney World staff as any other visitor.*) If this request is approved provide a list of all chaperones and their telephone numbers to the principal. Chaperones should be advised that they have the authority to direct students to stop any activity the chaperone deems unsafe or unreasonable. If students refuse to discontinue the activity, the chaperone should report the incident to the teacher/administrator immediately.

Provide an estimate of the following:

Number of chaperones:	Male _____	Female _____	TOTAL	_____
Number of student participating:	Male _____	Female _____	TOTAL	_____
Number of student not participating:	Male _____	Female _____	TOTAL	_____

TRANSPORTATION

Each person transporting the students in a private vehicle must show proof of current automobile liability insurance to the school supervisor and upon request to the parents/guardians of the student traveling in the vehicle. Volunteer drivers are required to carry minimum insurance requirements as specified by FL Statute 627.736. All volunteer drivers must have a completed and approved *School Volunteer On-Line Application* on record at the school prior to the event (see the School Volunteer Coordinator). The school must obtain a copy of each driver's auto insurance card and license before the event.

Method of transportation _____

If applicable, provide number of vehicles required: Cars/vans _____ Buses _____ Other transportation _____

OTHER CONSIDERATIONS

Indicate the number of other staff that may be required:

Custodian(s) _____	Substitute teacher(s) _____
School Police _____	Other _____ (specify) _____

If the following items are required describe the items and indicate who will provide them:

Equipment	_____
Clean up	_____
Meals/snacks	_____

MANDATORY SIGNATURES

SIGNATURE OF PERSON COMPLETING FORM DATE

PRINT NAME PX

Principal approval is required for ALL field trips/activities. Send a copy of all out-of-county field trip requests to the Area office.

SIGNATURE OF PRINCIPAL DATE

OUT-OF-COUNTY, OUT-OF-STATE OR OUT-OF-COUNTRY APPROVALS

Area Superintendent approval is required for trips other than within the county. The Chief Academic Officer must approve trips outside the state. Trips outside the continental United States require School Board approval.

SIGNATURE OF AREA SUPERINTENDENT DATE
(required for out-of-county)

SIGNATURE OF CHIEF ACADEMIC OFFICER DATE
(required for out-of-state)

SIGNATURE OF SUPERINTENDENT OR BOARD CHAIR *(required for out-of-county)* DATE



THE SCHOOL DISTRICT OF PALM BEACH COUNTY

Field Trip/Activity Roster

This form may be used to list students and chaperones involved in a field trip or activity.

SCHOOL	SCHOOL NO.	TRIP/ACTIVITY BEGINNING DATE / /	TRIP/ACTIVITY END OR RETURN DATE / /
ACTIVITY OR FIELD TRIP		TRIP SPONSOR	

Student	Payment	Parent Permission	Attending	Not Attending *	Absent	*If student is <u>not</u> attending indicate what teacher and room the student will be assigned to during the trip/activity.	Chaperones/Other Volunteers <small>All volunteers must have a completed and approved <i>School Volunteer On-Line Application</i> on record at the school prior to the event (see the School Volunteer Coordinator).</small>
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Total payment submitted

Cost of trip/activity

Funds needed



THE SCHOOL DISTRICT OF PALM BEACH COUNTY

Accident Time (00:00 AM/PM)	Accident Date (mm/dd/yyyy)	Student # (if applicable)
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Student **Visitor Accident Report**

INSTRUCTIONS: Complete all spaces and blocks. Keep the original on file at the school. Send a copy to the Department of Employee Benefits and Risk Management only if the injury results in medical care at a hospital or by a physician.

Name of School Reporting Accident	School #	Name of Injured Person (Last, First, Middle Initial)	Age	Gender	Injured Person Telephone #
Address of Injured Person (street #, street, apt. #, city, state, zip code)			Parent/Guardian Name (if applicable)		Grade (if app.)

GENERAL ACTIVITY	ACCIDENT LOCATION	SPECIFIC ACTIVITY	BODY PART INJURED	NATURE OF INJURY	ACCIDENT AGENT
01 Free Play	01 Admin. Area	01 Badminton	01 Abdomen	01 Abrasion	01 Animal
02 Going to/from Class	02 Arts & Crafts Class	02 Baseball	02 Ankle	02 Amputation	02 Automobile
03 In-County Field Trip	03 Auditorium	03 Basketball	03 Arm	03 Bruise	03 Ball Bat
04 Intramural Sports	04 Bathroom	04 Carrying	04 Back	04 Bite-Animal	04 Bicycle
05 Inside Classroom	05 Cafeteria	05 Climbing	05 Chest	05 Bite-Human	05 Broken Floor
06 Lunch Break	06 Corridor	06 Dancing	06 Ear	06 Bite-Insect	06 Curb
07 Out-of-County Field Trip	07 Gymnasium	07 Driving	07 Elbow	07 Burn	07 Door
08 Physical Education	08 Hard Court	08 Fighting	08 Eye	08 Dislocation	08 Dust
09 Interscholastic Athletics	09 Home	09 Football	09 Face	09 Foreign Body	09 Electrical Fault
10 S.A.C.C.	10 Economics	10 Gymnastics	10 Finger	10 Fracture	10 Falling/Flying Objects
99 Other	11 Locker Room	11 Lifting Objects	11 Foot	11 Hernia	11 Fence
	12 Off School Grounds	12 Lowering Objects	12 Groin	12 Laceration	12 Floor
	13 Parking Lot	13 Running	13 Hand	13 Multiple Injuries	13 Furniture
	14 P.E. Field	14 Sitting	14 Head	14 Puncture	14 Glass
	15 Playground	15 Small Group Games	15 Internal Injuries	15 Sprain/Strain	15 Hand Tool
	16 Science		16 Knee	16 Tooth, Broken	16 Hole/Depression
			17 Leg/Thigh	17 Tooth, Chipped	17 Loose/Broken Step
				99 Other	18 Loose/ No Railing
					19 Moped
					20 Motorcycle
					21 Other Person
					22 Other Vehicle
					23 Playground Equipment
					24 Pointed Object
					25 Power Machinery
					26 Power Tool
					27 Private Bus
					28 Public School Bus
					29 Sidewalk
					30 Stairs
					31 Toxic/Caustic Agent
					32 Trees/Bushes
					33 Volleyball Standard
					34 Window
					99 Other

<p>YES NO Check appropriate YES or NO Box:</p> <p><input type="checkbox"/> <input type="checkbox"/> Was first aid administered at school?</p> <p><input type="checkbox"/> <input type="checkbox"/> Did a rescue squad attend injured party?</p> <p><input type="checkbox"/> <input type="checkbox"/> Was a parent/guardian contacted? (if applicable)</p> <p><input type="checkbox"/> <input type="checkbox"/> Did a physician attend injured party? Indicate physician: _____</p> <p><input type="checkbox"/> <input type="checkbox"/> Was injured party taken to a hospital? Indicate hospital: _____</p> <p><input type="checkbox"/> <input type="checkbox"/> Was a District employee present at the accident? Name/PX: _____</p>	<p>Provide names, telephone #: and addresses of any other witnesses to the accident:</p>
	<p>Written description of accident (use second page if necessary)</p>

Written description of accident continued



THE SCHOOL DISTRICT OF PALM BEACH COUNTY

Volunteer Driver Information

PRINT OR TYPE

This form is to be completed by the volunteer/parent before the described event or activity. The completed and signed form must be given to a school official along with a copy of your current insurance card, signed for approval, and filed with the school. Parents/volunteers may not be able to know the final list or names of students who will be riding in their car until the day of the trip.

Thank you for volunteering to be a driver on a school district related field trip(s) or activity. The information requested by this form is required from each of our drivers. This is for your protection and the safety of the children.

School Name _____

Teacher: _____ Grade Level _____

Destination(s)(be specific) _____

Date(s) of Trip _____

Time of Departure _____ Time of Return _____

PROOF OF INSURANCE AND DRIVER'S LICENSE: As a volunteer driver I am providing the above named school with proof of current automobile insurance and will, if requested, provide proof to the parents/guardians of the students traveling in the vehicle. I understand that the School Board does not provide insurance or any protection for damage to vehicles operated by volunteers. I have been informed that based on current Florida law, the School Board is not responsible for the negligence of volunteer drivers. To my knowledge, my vehicle has no unsafe conditions and is in good repair. I have also shown the school a copy of my current driver's license.

Note that volunteer drivers are required to carry minimum insurance requirements as specified in Florida Statutes §§ 324.021 (\$10,000/20,000) and 627.736 (PIP), and volunteers are to complete the School Volunteer (VIPS) application (PBSD 0887) online if not already done so this school year.

Name of Driver _____

If driver is a parent of student(s) attending field trip/activity, List name(s) of student(s)

Make of Car _____ Color of Car _____ Year of Car _____

Tag Number _____ Tag State _____ Tag Expiration Date _____

Driver's License State _____ Driver's License Expiration Date _____

Vehicle Holds Maximum Number of Passengers _____ Number of Passenger Seat Belts in Vehicle _____

Number of car seats available (if applicable) _____

Signature of Driver/Parent *Date* *Signature of School Official* *Date*



THE SCHOOL DISTRICT OF PALM BEACH COUNTY

Field Trip Permission/Release

Elementary School Middle School
 High School

Permission is requested for your child (student) to go on a field trip. To give permission for your child to attend this field trip complete the information in Section II. Return the completed *Field Trip Permission* to the teacher named below along with payment* if there is a charge. If this *Field Trip Permission* is not returned, your child will not be permitted to attend. This form must be signed by the parent(s) and student, if over 18 years of age. Both parents should sign if feasible.

SECTION I - TRIP INFORMATION

NAME OF SCHOOL		SCHOOL CONTACT		TELEPHONE NUMBER	
TEACHER		GRADE	TRIP DURATION Number of: Days Nights <input type="checkbox"/> Overnight trip **		
DATE OF DEPARTURE	DEPARTURE TIME <input type="checkbox"/> A.M. <input type="checkbox"/> P.M.	DATE OF RETURN	APPROXIMATE RETURN TIME <input type="checkbox"/> A.M. <input type="checkbox"/> P.M.		COST PER STUDENT *
DESTINATION <input type="checkbox"/> In-county <input type="checkbox"/> out-of-county <input type="checkbox"/> out-of-country				NUMBER OF CHAPERONS Male Female	
METHODS OF TRAVEL (check all that apply) <input type="checkbox"/> School Bus <input type="checkbox"/> Private Charter Bus <input type="checkbox"/> Walking <input type="checkbox"/> Private vehicle*** <input type="checkbox"/> Other (specify) _____					
DRIVER <input type="checkbox"/> Adult <input type="checkbox"/> Student		LODGING (if applicable)			
PURPOSE FOR TRIP					
DESCRIPTION OF SUPERVISION +					

Attach any additional pages, if needed, including any relevant provisions in the student's IEP or 504 plan.

* No penalty of any type will be imposed against the student based upon a failure to pay for the field trip. No student shall be denied the right to participate for failure to pay for the field trip. The principal may forgo a planned activity or use of a particular item based upon the collection of insufficient funds to cover the cost of the item or activity. This request is for a voluntary payment.

** In the event of an overnight trip, students may not be supervised while in assigned rooms.

*** Each person transporting the students in a private vehicle must show proof of current automobile liability insurance to the school supervisor and to the parents/ guardians of the student traveling in the vehicle upon request. Volunteer drivers are required to carry minimum insurance requirements as specified by FL Statute 627.736 and complete the *School Volunteer Application* (PBSD 0887).

+ Describe the circumstances or times that the students will NOT be supervised by school staff or parents although adult supervisors will be present. Parents are encouraged to ask any questions about supervision on trip.

SECTION II - PARENT / LEGAL GUARDIAN APPROVAL

NAME OF STUDENT (last, first, middle initial)		TRIP DESTINATION			
HOME TELEPHONE NUMBER	BUSINESS TELEPHONE NUMBER	CELL NUMBER	EMERGENCY TELEPHONE NUMBER		
PHYSICIAN NAME	TELEPHONE NUMBER	STUDENT SWIMMING SKILL LEVEL (if applicable) <input type="checkbox"/> Non-swimmer <input type="checkbox"/> Beginning <input type="checkbox"/> Skilled			
OTHER STUDENT INFORMATION (allergies, medications, etc., be specific)			MEAL PROVIDED <input type="checkbox"/> By Parent <input type="checkbox"/> By School		

I agree and my child agrees to abide by all rules and safety precautions relating to this field trip activity. I am aware that during this trip certain risks are inherent. I understand that this field trip activity may involve certain conditions, hazards and potential dangers, including those associated with traveling in the above chosen method of travel or those associated with the facilities or property where the field trip will occur or whether the dangers are open and obvious or concealed. Any questions which have occurred to me have been answered to my satisfaction. I am participating in these activities of my own free choice. My signature acknowledges that I have been informed of the reasonably expected hazards associated with the field trip in which my child will be participating. The School District recognizes its responsibility for its negligent acts subject to the limits of Section 768.28, Florida Statutes. Based on current Florida Law, the School Board is not responsible for the negligence of volunteer drivers. I further agree to accept responsibility for any negligent, willful, or intentional act of my child and as a result will indemnify and hold harmless the School District for all costs, damages and attorneys fees. In the event of an emergency, reasonable attempts will be made to contact the parent. This would not prevent the emergency health care provider from acting in the best interests of the child. **I authorize emergency medical treatment for my child in the event of accident or illness during this field trip.**

Check here if the student wears a medical alert

Signature of Emancipated Student Date

Signature of Parent/Guardian Date

Signature of Parent/Guardian Date



THE SCHOOL DISTRICT OF PALM BEACH COUNTY

Student Field Trip Consent and Release For Other Than School Provided Transportation

This Student Field Trip Return Travel Consent and Release for Other Than School Provided Transportation form must be signed by the same person who signed the original Field Trip Permit (PBSD 0755)

I am the parent(s)/guardian(s) of _____ a student at _____ School. This consent and release relates to the trip to _____.

Fill out and check the appropriate box(es) for consent and release:

I have decided that on _____, _____, 20____ I will be **transporting** my own child to the designated field trip site and plan to deliver my child to the school group at _____ AM PM I will not leave my child unattended at the drop-off and will wait with the child until the group arrives. I understand that if I am not there at the scheduled time to meet the group, the group may not wait and my child may miss the field trip.

I have decided that on _____, _____, 20____ at _____ AM PM when the group is prepared to depart _____ from the field trip, I will be **meeting** my child at that time and having the child released to me. I will be responsible for transporting my child home. **I understand** if I am not at the **proper location** at the **scheduled time of departure**, my child will stay with the group and be transported by the School District.

My signature(s) below also acknowledges that I have been informed of the reasonably expected hazards associated with this manner of travel in which my child will be using and that I agree to the fullest extent permitted by law, to protect, defend, indemnify and hold harmless _____

School, the Palm Beach County School Board and their agents, chaperones, employees, and successors of any and all responsibility and liabilities, obligations, claims, demands, costs and expenses, including attorneys' fees, or demands of any kind and nature, including for any bodily or emotional injury or death, which may arise by, in connection with or resulting from my transporting the child to the field trip and /or removing my child from custody of the School Board on _____, _____, 20____ during the field trip.

Signature of Parent/Guardian

Date

Signature of Parent/Guardian

Date