

**Charleston County School District
Request for Approval of Field Trip
Cover Page**

(To be submitted with the appropriate Page 2 prior to financial contracts or commitments being signed.)

School: _____ Teacher/Trip sponsor: _____

Group or class/section: _____

Students: # Male: _____ # Female: _____ # Total: _____
(Submit a roster of all students to the office before departure.)

Chaperones	CCSD Employee?*	Male or female?*

(If needed, continue list on an attached sheet.)

**For each non-employee, attach a field trip chaperone form.*

Departure date/time: _____ Return date/time: _____

Destination: _____

For recurring field trips, attach a schedule of all trips including departure date and time, return date and time and destination for each trip.

Submit a complete itinerary and route description to the office before departure.

Cost per student: \$ _____ Paid by \$ _____ \$ _____
Student Other: _____
(Name of funding source)

For trips during the school day: How are you planning to pay this fee for students who cannot pay? _____

For overnight trips: What efforts have been made to provide fundraising or scholarship opportunities for students? _____

Lunch arrangements: _____

_____ Cafeteria manager has been notified.

Transportation arrangements: _____

If private vehicles are used, list all drivers. All drivers must be at least 21 years of age and provide proof that they have the minimum insurance coverage required by the State of South Carolina. The principal must approve the use of private vehicles and the drivers.

Nursing services arrangements: _____

Date nurse notified: _____ Signature of nurse _____

The nurse must be notified in writing four weeks in advance of a field trip with a list of students to attend. The nurse shall provide appropriate training for employees.

Principal signature/date

Identified students with medical problems/needs: _____

Parental permission: Attach a copy of the form that shall be sent home. (All signed slips must be submitted to the office prior to departure as well as a list of students who shall remain in school with their room assignments.)

Charleston County School District
Page Two for Instructional Field Trip

This field trip shall help students achieve the following South Carolina curriculum standards.

Field trip learning objective(s)

_____ The lesson plans shall reflect preparatory activities prior to the trip, learning activities during the trip, and follow-up instructional activities and assessment of student learning after the trip.

Total number of students in class/group: _____

Total number participating in field trip: _____

Why are students not participating? _____

Describe what students who are unable to participate shall do while the trip is underway: _____

Briefly describe what assignments shall be made to ensure that students who are unable to participate achieve the learning objective(s) of the trip: _____

Teacher's signature/date

APPROVED:

Principal

Date

Associate superintendent (*if overnight*)

Date

Superintendent (*if out of state*)

Date

Superintendent (*if out of country*)

Date

Charleston County School District

Page Two for Interscholastic/Extracurricular/Co-curricular Activity

This field trip shall provide the following competitive, enrichment or learning experience for participants. _____

Total number of students in class/group: _____

Total number participating in field trip: _____

Why are students not participating? _____

Supervising chaperone's signature/date

APPROVED:

Principal Date

Associate superintendent (*if overnight*) Date

Superintendent (*if out of state*) Date

Superintendent (*if out of country*) Date