



19/20-School Sponsored Field Trip Request

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* Required

Trip Detail

School Requesting Trip Approval *

Your answer

This is a required question

Sponsoring Activity, Club, Class, Sport *

Your answer

Trip Objective(s) *

Your answer

Travel Date(s) *

Your answer



Destination information including hotel name, address, phone number, and website. *

Your answer

Funding Source(s) *

Your answer

Date you met with your Administrator for site review and approval. *

Date

mm/dd/yyyy

Name of Administrator who approved your trip. *

Choose

▼

Have you worked with nutrition services to plan for meals while on your trip? *

Yes

No

N/A

Other: _____

Please upload a well-planned and comprehensive trip itinerary *

[ADD FILE](#)



Please upload all documents that will be provided to parents in advance of departure including details you will cover during your family information meeting. *

[ADD FILE](#)

Please confirm that all parent permission forms are signed and are filed at the school. ***Please note: a permission slip is required for each trip and must be kept on file for one year after the trip*** *

Yes

No

Please list all staff members who are attending and their contact information while on this trip. *

Your answer

Please provide the names of all volunteers (including staff members who will not be acting in their official capacity, spouses, non-active participants, etc.) who will be attending this trip. *

All volunteers must have a current background check on file and must have completed the mandatory volunteer orientation available to them on SafeSchools in order to be authorized to attend trips. To confirm a current background check is on file with your location, please check the HelpCounter volunteer computer in your front office. If they do not appear in the system, they do not currently have a cleared background check on file for that location. If they have a current background check on file at another location, their clearance can be updated to include yours. Please have them contact 541-790-7669 or volunteersupport@4j.lane.edu to request the update. If there is a need for a new background check on file please instruct them to go to <https://www.helpcounterweb.com/welcome/apply.php?district=eugene> and submit a new application. PLEASE BE AWARE BACKGROUND CHECKS CAN TAKE UP TO TWO WEEKS FOR PROCESSING! PLAN AHEAD!
<https://docs.google.com/document/d/1xChZ9GCNEwEVRnMhLEYH3OdPfnMrUXhS7FA278kqrSg/edit#heading=h.5a7nx4iwsct>

Your answer



Please confirm that all volunteers have signed the volunteer agreement and that the agreement is filed at the school. *

- Yes
- No
- N/A No Volunteers Attending

Please provide the date that you reviewed the Student Medical report provided by the nurse at your location. *

Date

mm/dd/yyyy

Please confirm that you have planned appropriately for student medical concerns after meeting with your nurse Ex; diabetic care, medical concerns during travel, special considerations during the night. *

- Yes
- No
- N/A

Who attending this trip is First Aid/CPR/AED certified, trained by the nurse to administer medication, and (if needed) Epi pen certified?

<https://www.4j.lane.edu/instruction/studentservices/health/staffresources/> **Please note: all coaches should have current First Aid/CPR/AED certification** *

Your answer



What supports are needed for students who receive 504 or IEP services? *

Your answer

Method of Transportation (outside rentals of motorcoaches or charter buses are not permitted) *

- Personal Vehicles including rentals (Adults, Staff,Volunteers)
- Airplane (Please have a safety/supervision plan in place that is outlined on your itinerary)
- Train (Please have a safety/supervision plan in place that is outlined on your itinerary)
- School Bus- bus_trips@4j.lane.edu
- https://docs.google.com/document/d/1xLxwShtdPWiY_6FDDAi5_eMjFqzeFXdfOx60GV4uU68/edit
- Activity Van (drivers must be van certified with transportation) 541-790-7477
- 4J Yellow Charter Bus
- https://docs.google.com/document/d/1xLxwShtdPWiY_6FDDAi5_eMjFqzeFXdfOx60GV4uU68/edit
- Parent self transport
- Other: _____



Does your trip include any of the following? *

Depending on your answers, there may be important insurance implications related to the coverage of your trip.

- Boats, Swimming, Near or Around Water ***Access to pool/hot tub will not be permitted without a licensed and insured lifeguard.***
- Animals
- Camping
- Trampoline
- Recreational watercraft (such as kayaking or rafting)
- Beachcombing
- Students cooking
- Snow tubing/Skiing/Snowboarding
- Water parks
- Amusement Parks
- N/A
- Other: _____

How many Students will be attending this trip? *

Your answer _____

Pertaining to Overnight Travel: How have sleeping arrangements been determined and have parents been notified?

Your answer _____



Pertaining to Overnight Travel: Where will staff and volunteers sleep in relation to students?

Your answer

Supervision Plans: Please briefly describe how staff and volunteers will ensure student safety on the trip. *

Your answer

Discipline Plan: Please briefly describe your plan for a student who needs to be removed due to behavior needs. *

Your answer

Pertaining to Overnight Travel: Please provide the names of the individuals who will be responsible for bed checks and the times they will be done.

Please note 4J requires two visual bed checks to be completed; best practice is for two adults to complete the checks together. Please plan for gender appropriate bed checks.

Your answer

Please confirm that the Student Code of Conduct and Boundary Invasion policies will be covered with students/families within 24 hours of departure of this trip. *

I confirm the above to be true

By Typing My Name Below, I am Confirming the Above is True and Accurate. **A copy of this request will be sent to your administrator; this request will not be approved without administrative acknowledgement. ***

Your answer



A copy of your responses will be emailed to chinn@4j.lane.edu.

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