

## 21/22-School Sponsored Field Trip Request

Please use this form to request approval for any school-sponsored field trips. Trip requests must be received 30 days in advance of day trips, 45 days in advance of in state overnight trips, and 90 days in advance of high risk, out-of-state trips, or outdoor school.

All required forms and examples can be located by accessing the 4J Field Trip Reference Guide

chinn@4j.lane.edu [Switch account](#)



The name, email, and photo associated with your Google account will be recorded when you upload files and submit this form

\* Required

What type of trip are you requesting? \*

- Day
- In State Overnight
- Out of State, High Risk, Outdoor School

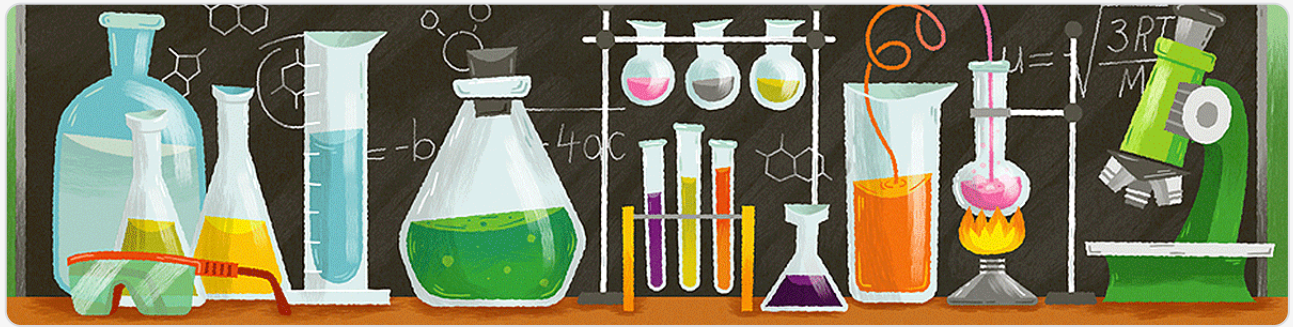
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 Saving...

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\* Required

### Approval Requirements-Day Trip

I understand that failure to submit my trip request the mandatory 30 days in advance of a day trip may result in a denial of this request. \*

Yes

I understand that failure to meet all trip requirements 5 days prior to the scheduled trip date will result in a denial of this request. \*

Yes

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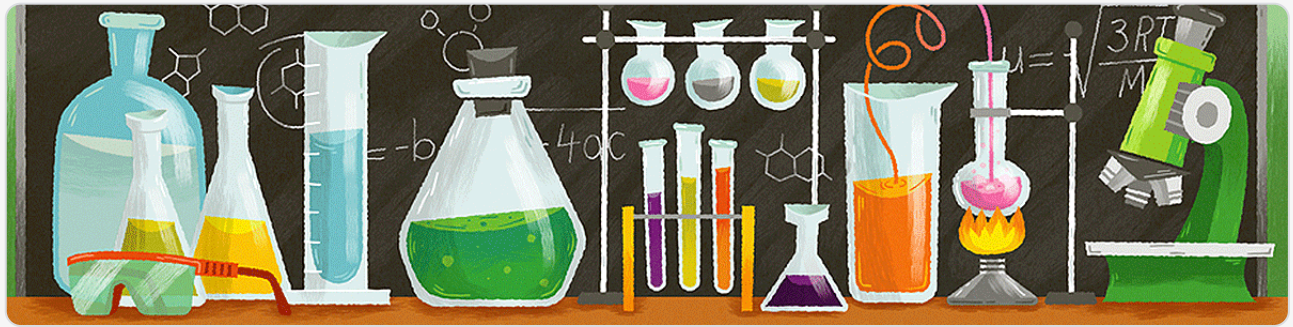
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\* Required

### Trip Detail

School Requesting Trip Approval: \*

NA

Sponsoring Activity, Club, Class, Sport \*

NA

Trip Objective(s): \*

NA



Trip Date(s): \*

NA

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

NA

Funding Source(s) \*

NA

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

Date

08/23/2022 

Name of Administrator who approved your trip. \*

CHINN, ALLAN



Is this field trip scheduled on a day in conflict with a major religious holiday? It is <sup>\*</sup> important to note that Board Policy JEF states: "The field trip approval process will include a question about scheduling and major religious holidays. In order for a field trip to be scheduled on a major religious holiday, an administrator must review and approve the request. Administrator approval is also required to schedule a major co-curricular or extra-curricular activity on a major religious holiday, when scheduling is within the control of the school or district."

Yes

No

Other: \_\_\_\_\_

Have you worked with Nutrition Services to plan for meals while on your trip? <sup>\*</sup>

Yes

No

N/A

Other: \_\_\_\_\_

Please upload a well-planned and comprehensive trip itinerary. <sup>\*</sup>

[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 or will be signed and kept on file 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

Other: \_\_\_\_\_

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 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](mailto: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 BE AN AHEAD!



PROCESSING PLAIN AHEAD:

<https://docs.google.com/document/d/1xChZ9GCNEwEVRnMhLEYH3OdPfnMrUXhS7FA278kqrSg/edit#heading=h.5a7nx4iwscit>

\*

Your answer

Please confirm that all volunteers have or will sign the volunteer agreement and that the agreements will be filed at the school. \*

- Yes
- No
- N/A No Volunteers Attending

Please provide the date that you have or will review 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



Pertaining to Overnight and High Risk activities and as needed: 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

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

Your answer

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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](mailto:bus_trips@4j.lane.edu)  
[https://docs.google.com/document/d/1xLxwShtdPWiy\\_6FDDAi5\\_eMjFqzeFXdfOx60GV4uU68/edit](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\\_6fDDA15\\_eMjF-gzeF-XdrUx6U\\_GV4uU68/edit](https://docs.google.com/document/d/1xLxwShtdPWiy_6fDDA15_eMjF-gzeF-XdrUx6U_GV4uU68/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 how will parents be notified?

and how will parents be notified?

Your answer

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

Your answer

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

Your answer

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

Your answer

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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. \*



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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 acknowledgment.\*\*:

Your answer \_\_\_\_\_

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

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