

## Field Trips and Excursions

Instructional field trips are those that are directly related to ongoing classroom instruction. They provide a means for staff and students to relate the instructional program to the community outside the schools. A field trip consists of one or more students who investigate or participate in real and life-like experiences away from the classroom.

Student trips provide the most effective means of accomplishing certain objectives related to given aspects of the instructional program. Trips should be considered as a method of instruction and planned as such with definite objectives determined in advance.

Transportation for field trips will be provided by bus or other district vehicle. Circumstantial exceptions to this are listed in AP 6340 Transportation of Students.

On all school sponsored trips involving pupils, provisions will be made for proper supervision.

### Field Trip Guidelines

The District recognizes the valuable educational experiences that may be gained by students in a setting other than the classroom. While these experiences may be worthwhile, certain guidelines must be established to assure student and staff safety as well as assure adequate communications of expectations of the trip among parents, students, staff and administration. The expectations may vary depending upon whether the trip is part of the regular school curriculum, an extracurricular activity, or travel to a foreign country.

#### I. Educational Field Trip

The educational field trip is a departure from the classroom which may be scheduled during the school day, weekends, holidays, teacher planning days, etc. for planned experiences related directly to the program of instruction. The activity may include travel by school bus, other approved vehicles defined in section III or may be a walking tour.

The following conditions shall apply:

- a. The trip must have educational relevance and the approval of the principal.
- b. Overnight trips may be authorized for high school students only.  
(The Superintendent may approve exceptions to this provision on a case by case basis.)
- c. Overnight trips are not to be scheduled during the last week of a semester.
- d. Pupils shall not be charged for the cost of transportation or any other fee.
- e. The Principal or designee shall acquire advanced written permission of the parents or guardian for each student for each trip. The school shall provide a meaningful educational program for any student who is unable to participate in the field trip because of the lack of parental approval. (AF 4410-a)
- f. Any trip exceeding 250 miles (one way), or crossing into a foreign country, or having an overnight stay, shall require the approval of the Fargo Public Schools Superintendent's Cabinet.

A proposal must be submitted to the Superintendent's Cabinet at least 60 days prior to the proposed field trip. A proposal shall contain the following: description of activities in

which students will participate, statement of purpose of the travel, an itinerary which includes arrival and departure times at each point of the trip, cost estimate - including how expenses will be paid. A proposal will be evaluated on the following criteria: educational value, expense, extent to which all students may participate, and the amount of school time missed. Complete the Field Trip Checklist (AF 4410-d).

- g. An elementary or middle school classroom group on a field trip to a location other than an in-city school or in-city school contracted program, shall attempt to include an adult for supervision for each twelve (12) pupils. High School field trips shall attempt to include an adult for each fifteen (15) pupils.
- h. According to AP 3512/5512, no aquatic activities may be conducted at any out-of-town pool or other water facility unless the pool or other water facility is properly licensed, a currently certified lifeguard(s) provided by the water facility whose only responsibility shall be to lifeguard swimmers is on duty, and a FPS-affiliated adult supervisor is present at the pool or other water facility.

## II. Co-Curricular and Other School Sponsored Activity Trips

The co-curricular and activity trips are supplemental to the district's regular educational program of study. Co-curricular and activity trips made during the school day should be kept to a minimum. If it is necessary or desirable for a student to participate in a co-curricular activity during class time, arrangements should be made for make-up work to be provided to the student as a substitute for class time. The following conditions shall apply to all co-curricular trips:

- a. Co-curricular trips shall have educational value and shall be approved by the Principal. Activities governed by the North Dakota High School Activities Association are authorized for travel pursuant to the approved schedule of competition and do not need further approval.
- b. Pupils may be charged for the cost of the co-curricular activity; however, provision will be made to provide financial assistance so that students of all economic backgrounds are able to participate.
- c. For school sponsored activity trips, the Principal or designee shall acquire advanced written permission of the parents or guardians for each participant for each trip. (AF 4410-a)
- d. Any trip exceeding 250 miles (one way), or crossing into a foreign country, or having an overnight stay, shall require the approval of the Fargo Public Schools Superintendent's Cabinet. *Refer to- I. Educational Field Trip, item f -for procedure to follow.*
- e. An overnight co-curricular activity for a high school activity shall be attended by one chaperone per fifteen (15) students as a minimum. Extended trips may require more than minimum supervision to compensate for emergency conditions created through illness or accident.
- f. Overnight trips are not to be scheduled during semester exam weeks.
- g. The cost to students for participation shall be minimized. The value of any travel or housing benefit earned based on the number of participants, such as a free airline ticket or room, beyond the actual expenses of the chaperones, shall be applied to reduce the overall cost to the student participants.

- h. Regular annual high school trips to national or regional conventions, such as those taken by academic teams, debate teams, FBLA, and journalism staff must be approved by the Superintendent or designee. All other procedures must be followed.

III. Transportation

Transportation of students will be provided by the contracted carrier for Fargo Public Schools. Transportation by private automobile or other approved vehicle is allowed only when school bus or commercial bus transportation is unavailable or impractical due to the size of the group. Staff members or volunteers who drive their private vehicles must provide a copy of a valid driver's license and a copy of current insurance. Private transportation requests must be made in writing and must be approved by the Superintendent or designee. (See AP 6340 Transportation of Students for additional information.)

IV. Domestic and Foreign Travel Experiences - Not School Sponsored

From time to time students and teachers, on a voluntary and individual basis, outside the regular instructional programs, make trips of varying duration to US cities and foreign countries. (This includes "senior class trips".) These unofficial trips are not endorsed or supported by the Fargo Public School District. Because the Fargo Public School District is not involved in the curriculum, itinerary or selection of advisors for such trips, no publicity, literature or advertisements may infer official sponsorship or include the name of either the individual school or Fargo Public School District.

Class time may not be used for the planning or promotion of such trips and no meetings shall be conducted during the school day. Commercial agencies or other non-school agencies shall not use the name of an individual school of the Fargo Public Schools or any of its resources to organize or promote educational or extra-curricular trips.

No equipment or materials belonging to the Fargo Public Schools may be used (as per Administrative Policy 3511).

6/8/93  
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Revised 11/03/2014  
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Revised 10/2015  
Revised 7/2019

**STUDENT TRAVEL AUTHORIZATION**  
**Fargo Public Schools**

I, the undersigned parent or legal guardian of \_\_\_\_\_,  
grant permission for my child or ward to travel to \_\_\_\_\_  
sponsored by \_\_\_\_\_.  
(Name of School or School Group)

I understand the students are scheduled to depart from school at \_\_\_\_\_ a.m/p.m.,  
on \_\_\_\_\_ and are scheduled to return at \_\_\_\_\_ a.m./p.m.  
(Month/Day/Year)

on \_\_\_\_\_.  
(Month/Day/Year)

I understand, acknowledge and agree that:  
The Fargo Public School District will provide for reasonable supervision of students within its care and control. The supervision will be consistent with the ages of the students.

While the District has taken appropriate action to ensure that this activity is conducted in reasonably safe conditions, there are certain risks inherent in travel and at the destination. Fargo Public Schools does not carry coverage for student accident insurance. I understand that if my child should be injured, I will be responsible for medical expenses. I further understand that an employee or volunteer has no personal liability unless he or she has acted recklessly, or intentionally to injure my child.

\* Please list any health concerns you feel we should be aware of:

\_\_\_\_\_

\* If your child needs special medical supplies, i.e., an inhaler, diabetic equipment or an Epi-pen, IT IS THE PARENT'S RESPONSIBILITY to send this equipment with their child.

Medical supplies sent with student: \_\_\_\_\_

Knowing the dangers, hazards, and risks of such activities, and in consideration of being permitted to participate in the Activity, I agree to assume all the risks and responsibilities surrounding my child's participation in the Activity and transportation to and from the activity.

I understand and agree that the District may not have medical personnel available at the location of the activity. I understand and agree that District is granted permission to authorize emergency medical treatment, if necessary. I understand and agree that District assumes no responsibility for any injury or damage that might arise out of or in connection with such authorized emergency medical treatment.

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Please print name on this line

\_\_\_\_\_  
Emergency Contact Number

**VOLUNTEER DRIVER DISCLOSURE FOR  
SCHOOL SPONSORED ACTIVITY**

I hereby volunteer to use my private automobile to transport students from

\_\_\_\_\_ School to \_\_\_\_\_ on

\_\_\_\_\_.  
(Month/Day/Year)

In volunteering these services, I understand that I am responsible for the safety of my passengers and verify that I have liability insurance to cover any claim for injury. I also state that I have a valid driver's license and a driving record without any major traffic offenses. I agree to comply with all laws and district safety standards associated with transporting children, including using proper child safety seats and/or seatbelts and ensuring that passengers under 100 lbs do not sit in the front seat. The District shall provide a copy of these requirements prior to the activity and may inspect my vehicle to ensure it is equipped with all necessary safety devices and equipment and can safely transport passengers.

Current Driver's License # \_\_\_\_\_

Insurance Policy # \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Agent \_\_\_\_\_

Driver's Printed Name \_\_\_\_\_

Driver's Signature \_\_\_\_\_ Date \_\_\_\_\_

Principal's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Non-School Sponsored  
STUDENT TRAVEL AUTHORIZATION**

I, the undersigned parent or legal guardian of \_\_\_\_\_,  
(Child's Name)

grant permission for my child or ward to travel to \_\_\_\_\_  
(Location)

sponsored by \_\_\_\_\_.  
(Name of Sponsor/ Group)

I understand the students are scheduled to depart on \_\_\_\_\_ and are  
(Month/Day/Year)  
scheduled to return on \_\_\_\_\_.  
(Month/Day/Year)

I understand, acknowledge and agree that:

The Fargo Public Schools District assumes no responsibility for any of the activities with respect to this non-school sponsored trip. It is my responsibility to ensure that my child has the appropriate insurance coverage for both accidents and/or illness that might occur on this trip. The District does not provide coverage for accident or any type of health insurance to provide coverage for my child while on this trip.

In addition, the District does not assume any responsibility for any negligent acts of the people in charge of this trip, nor the actions of any of the students or others that might cause any injuries to my child.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Please print name on this line

**FIELD TRIP CHECKLIST**

Name of Field Trip: \_\_\_\_\_

Proposal Submitted By: \_\_\_\_\_

✓	<i><b>This checklist will assist you in preparing your proposal which must be submitted to the Field Trip Review Committee. Check off each area and include this checklist with your proposal to identify that the information is included in your proposal. Thank you.</b></i>
	Building administrative approval
	Purpose of trip: How does this trip support the District Results How does this trip support the specific discipline standards
	Description of activities
	Dates of trip
	Itinerary
	Amount of school time missed
	Name of advisor(s)
	What students will be involved
	How are students selected
	How many students will be involved
	How will chaperones be selected
	How many chaperones will accompany group
	How will chaperone expenses be paid
	Cost - simple budget (itemize: transportation, meals, registration, lodging, other fees, other out of pocket expenses anticipated per student)
	How will money be raised
	Who is accountable for any money collected or bills to be paid
	Where is money deposited
	Is there any rebate from sponsoring agency; if so, how will money be used
	Copy of parent letter describing trip
	Proof of insurance for all "out of country" trips

***Criteria which will be used to evaluate whether the field trip will be District sponsored:***

Educational value

Expense

Extent to which all students may participate

Amount of school time missed

Risk to group

*Submit proposal to: Associate Superintendent*

**STAFF REQUEST TO USE PRIVATE AUTOMOBILE  
TO TRANSPORT STUDENTS**

I hereby volunteer to use my private automobile to transport students for the following reasons:

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I understand that, if approved,

\* The approval is only for the reasons listed above.

\* I must have parent/guardian pre-approval to provide transportation for students in my private automobile. I am responsible to keep documentation of the parent/guardian pre-approval. I understand the District may request copies of the documentation.

\*Approval is only for the event scheduled for \_\_\_\_\_ (date) at \_\_\_\_\_ (time).

In volunteering these services, I understand that I am responsible for the safety of my passengers and verify that I have liability insurance to cover any claim for injury. I also state that I have a valid driver's license and a driving record without any major traffic offenses. I agree to comply with all laws and district safety standards associated with transporting children, including using proper child safety seats and/or seatbelts and ensuring that passengers under 100 lbs. do not sit in the front seat. The District may inspect my vehicle to ensure it is equipped with all necessary safety devices and equipment and can safely transport passengers.

Current Driver's License # \_\_\_\_\_

Insurance Policy # \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Agent \_\_\_\_\_

Driver's Printed Name \_\_\_\_\_

Driver's Signature \_\_\_\_\_ Date \_\_\_\_\_

Principal/Administrator's Signature \_\_\_\_\_ Date \_\_\_\_\_

***Send the completed form to the District Office, Attn: Associate Superintendent***

**Approval:**

I approve the volunteer's request to use their private automobile to transport students for the reasons listed above.

Associate Superintendent's Signature \_\_\_\_\_ Date \_\_\_\_\_