

BESSEMER CITY SCHOOLS



ACADEMIC FIELD TRIP PROCEDURES AND GUIDELINES

Field trips are a part of students' educational programs. They provide opportunities for both connecting theory and practice, and experiencing the physical and social realities, which are the subject matter of our curriculum. As a part of our educational program, we will take steps to foster field trip safety while at the same time recognizing that there are inherent risks in many activities and significant levels of personal responsibility that each student must assume for him/herself.

The board of education recognizes that field trips when used for teaching and learning are educationally sound and important ingredient in the instructional program of the school. Properly planned and executed field trips should:

- Supplement and enrich classroom procedures by providing leaning experiences in the environment outside the schools;
- Arouse new interests among students;
- Help students relate school experiences to the reality of the world outside of school;
- Bring the resources of the community natural, artistic, industrial, commercial, governmental, educational-within the student's learning experience and;
- Afford students the opportunity to study real situations and real processes in their actual environment.

A field trip shall be defined as any planned journey for students away from District premises, which is under the supervision of a professional staff member. The Board considers student excursions that integrate educational programs with the resources of the community to be a vital part of the education program. The success of all field trips depends on advanced planning by the teachers. Carefully planned field trips that are directly related to adopted curriculum are encouraged.

The Board of Education must approve all overnight/out-of-state field trips. When seeking approval for such a field trip, the attached forms must be completed and submitted to the superintendent <u>Two Weeks</u> prior to the board meeting.

SCHOOL NAME:

Travel Security and Information (Bessemer Police Department – (205) 425-2411)

The group leader (teacher) shall make arrangements to notify the Bessemer Police Department in reference to estimate departure and arrival times to and from out of town/state destination. School official and parents will be notified by our local Police Department, should an accident or extended delay occur beyond normal arrival time.

Hotels: Interior corridor will be selected for safety (if possible).

FIELD TRIP ITINERARY (to be attached)

INTEGRATED STUDY UNIT

Narrative: State the educational objectives and purpose of the field trip. (List goals and activities)

Objectives and purpose include the following:

(Check all that apply)

- _____ ACT Aspire
- _____ ACT Aspire with Writing
- _____ ACT WorkKeys
- _____ State Course of Study
- _____ Bessemer Curriculum Alignment

INTEGRATED STUDY UNIT (cont.)

Provide a detailed lesson plan with activities to be used four weeks prior to the trip.

Describe in detail how the planned trip relates to the curriculum.

Attach a copy of the group scavenger hunt discussion question and points of interest, (reference).

Students will keep a daily reflective journal.

REQUEST FOR FIELD TRIP FORM

Name of School	Name of Teacher				
Grade level of classDestination					
Purpose of field trip (use r	everse side if necessary)				
Name of common carrier_					
	Time of DepartureTime/Date of Return				
to the students	ivities in planning and preparing for the field trip will provide maximum benefit				
	How many students?				
	edures be discussed with the group?				
	d by a parent or guardian be on file at the school before departure? made with authorized person at the site to be visited?				
	child required to pay?				
	de to take care of the cost of those students who cannot pay?				
What follow up activities a	are planned?				
Signature of Teacher	Date				
Approved: Yes	No Principal Signature				
Approved: Yes	No Superintendent Signature				

METHOD OF TRANSPORTATION

Company or Agency						
	Name				Proo	f of Insurance
Address					Telephone	
Departure Date of Field Trip		/		/		T
	Month		Day		Year	Time
Return Date of Field Trip	Month	_/	Day	/	Year	Time
Field Trip Coordinator	Name				Posit	ion
Destination						
Number of Teachers/Staff Res	ponsible		(w	vith attac	hed demographi	c data)
Number of Chaperones		(with att	ached de	mograph	ic data)	
Number of Students	(wi	th attach	ned demo	graphic o	data)	

FINAL FIELD TRIP CHECK LIST

(This information <u>must</u> be provided to your principal before departure) (Minimum of two weeks' notice)

Destination Confirmed
Date Confirmed With Principal
Transportation Confirmed
Parental Permission Forms Signed and Returned
Chaperones Verified
Student Groups Assigned
Group Leaders Assigned
Name Tags Completed
Snacks Purchased and Packed (if applicable)
Lunches and Drinks Packed (if applicable)
List of Student Names, Addresses, and Phone Numbers (include ones to be left at school)
First Aid Kit included (should be in teacher possession)
Planned Lessons and Activities Left for Students Not Going On the Trip
Lesson Outline, Objectives, Journal Reflections, and Other Activities Provided For Students Going On the Trip

A review of the trip and activities as they relate to the curriculum will be re-taught, discussed, and evaluated.

EVALUATION

Describe the type(s) of evaluation(s) to be used at the conclusion of the trip.

Describe how the non-participating students will be evaluated.

ARRANGEMENT FOR STUDENTS LEFT BEHIND

The remaining teachers that will provide for non-participating students are:

FUNDRAISING PLANS

Please list all fundraising plans (including special arrangement/efforts for students who cannot afford to go on the trip).

PERMISSION & MEDICAL RELEASE FORM

Name	Phone Number				
Address	Zip				
School	Birthday/Grade MM DD YYYY				
Parent/Guardian's Name					
Destination	Date				

I hereby release the Bessemer Board of Education from the responsibility and liability for any illness or injury that my child may sustain during this activity. In the event of an emergency, I hereby authorize an adult leader of this field trip as agent for me, to consent to any X-ray examination, medical, dental, or surgical diagnosis, treatment, and hospital care advised and supervised by a physician, surgeon, dentist (as appropriate), licensed to practice under the laws of the state where services are rendered, either at a doctor's office or in any hospital. I expect to be contacted as soon as possible.

THIS DOCUMENT WILL BE VALID AND IN FULL EFFECT UPON PARENT(S) SIGNATURE.

Date:	//	/ DD	ΥΥΥΥ	Parent(s) Signature	
Emerge	ncy Contact #1	<u> </u>			_Phone #
Emerge	ncy Contact #2				_Phone #

GENERAL DEMOGRAPHICS DATA FORM MEDICAL CONSENT

Name				Date of Birth
Address				Telephone
Emergency Contact Person				Emergency Telephone
		Мес	lical Info	rmation
Check Medication permit	ted, as dee	emed nece	ssary:	If your child requires special medication, please list name of medicine, recommended dosage and time(s) administered.
Headache:				
Ibuprofen	Yes	No		
Tylenol		No		
Intestinal Disorder:				
Kaeopectate	Yes	No	_	
Castora	Yes	No	_	
Pepto Bismol	Yes	No	_	
Motion Sickness:				
Dramamine	Yes	No	_	
Minor Cuts & Bruises:				
Mercurochrome	Yes	No	_	
Cough or Cold:				
Cough Syrup	Yes	No	_	
		ME	DICAL CO	DNSENT
l give permission for my c physician if medical treat				to be treated by a licensed
In case of emergency, I gi licensed physician.	ve my con	sent for hi	m/her to	receive medical prescriptions prescribed by a
Signature of Parent(s)			-	Insurance Company
Print Name			-	Policy Number

RULES AND GUIDELINES FOR STUDENTS AND PARENTS

In order to insure a safe, educational, and enjoyable trip for students and adults, the following rules and guidelines have been established:

- Courtesy should be shown to everyone at all times. This includes other students, chaperones, hotel personnel, tour guide, stewardesses, restaurant, employees, etc.
- All chaperones and official trip authorities need to be obeyed and respected.
- Everyone, students and adults, must adhere to the schedule.
- No liberties are to be extended to the child of a chaperone that is not allowed for any other child.
- Restrictions will be enforced for use of profanity, disobedience, and any other inappropriate behavior.
- All chaperones must a uniform lights-out time in their room each night. The teachers will decide on the time based on the evening's activity.
- All games, electronic devices, etc. must not disturb others at any time.
- No vandalism of hotel or public property will be tolerated.
- No boisterous play on the airplane, bus, train, or in the hotel.
- No visiting between rooms unless monitored by the chaperones from both rooms.
- No leaving the group to buy souvenirs, etc. Time will be built into the schedule for purchasing souvenirs.
- Chaperones are to remain with the group at all time.

I understand and agree on the rules and guidelines stated above, and agree to conduct myself in accordance with the.

Student	Date
Parent	Date
Chaperone	Date