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## STUDENT FIELD TRIP GUIDELINES

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### POLICIES AND PROCEDURES

1. Purpose. The purpose of this memorandum is to provide the area school office guidelines regarding student trips except for UIL and athletic competitions.
2. Effective. Immediately
3. Applicability. This memorandum applies to schools within all *High Schools Office*.
4. Guidelines Governing Student Trips. All student trips, excursions, or special activities held off campus will be in compliance with board-approved basic guidelines, policies, and procedures contained in the listed References. For schools that report to the Secondary School Office 2, the following additional rules and guidelines will be applicable:
  - a. Local Trips. *The Principal will notify the High Schools Office in writing, **at least three weeks prior to the trip**, that students will be representing the school locally on an excursion or at a special program or activity. Local trips are considered trips within Harris County and its adjacent counties (Liberty, Chambers, Galveston, Brazoria, Fort Bend, Waller, Grimes, and Montgomery). Form 40.5110, Sponsor's Request for Approval of Field Trip, signed by the Principal will serve as written notification.*
  - b. Out-of-District. Form 40.5110 will be completed and *submitted to the High Schools Office* least **four** weeks prior *if the trip is out-of-district or for an extended period*. The form will be accompanied by complete trip information to include the following:
    - (1) A list of specific learning objectives and activities related to the trip. It is recommended that schools use the Field Lesson Implementation Plan format for providing this information. This form is required when using Title I, Part A funding.
    - (2) An itinerary that will include at a minimum detail on destinations, transportation, lodging, and the key dates and times of the trip and its activities.
    - (3) List of chaperones and titles. All chaperones who are not District employees must have registered with Volunteers in Public Schools (VIPS) and cleared the criminal history background check before being allowed to chaperone.
    - (4) List of students going on the trip with verification that they are eligible to participate in accordance with attendance and extracurricular activity policies.
    - (5) Verification that any unusual medical information on students which may be necessary in the event of an emergency has been obtained.
    - (6) Verification that Parent Approval Form will be completed by the parent and on file at the school prior to participation by the student.
    - (7) Verification that all appropriate students (in a class, grade level, subject area, team, club, and the like) have been informed they are permitted to participate.

- (8) Verification that parents and students have been informed that the school will incur the costs associated with the field trip. Parents and students will not be charged for any portion although fund raisers and donations may be used to offset the costs associated with the field trip.
- c. **Trips Outside the United States.** Foreign **travel will be limited to high school students** and will be allowed only to countries where the political climate is favorable. Information on travel warnings issued by the U.S. Department of State can be obtained at [http://travel.state.gov/travel/cis\\_pa\\_tw/tw/tw\\_1764.html](http://travel.state.gov/travel/cis_pa_tw/tw/tw_1764.html). In addition to the documentation required for out-of-district trips Form 40.4250, Release of Liability for Student Participation in Trip with Destination Outside the United States, will be completed for each student who is participating in the trip. Copies of the Release of Liability forms and Parent Approval forms must be submitted to the *High Schools Office* with the trip request prior to being forwarded to the Superintendent of Schools for approval.
5. **Preplanning Permission from the Superintendent of Schools.** **Out-of-district trips three or more schools days in duration require the approval of the Assistant Superintendent and Chief of Schools (Superintendent of Schools' Designee); and trips outside the United States require approval of the Superintendent of Schools.** Schools are required to obtain preplanning permission for these trips. Preplanning permission should be obtained no later than 60 days prior to out-of-district trips and 120 days prior for foreign travel. *Parents and students should not become involved in any preparation activity related to the trip until after the preplanning permission has been granted by the Chief of Schools/Superintendent of Schools.* It is recommended that this permission be obtained by a memorandum request. A sample memorandum is attached.
6. **Field Lessons Funded Through Title I, Part A.** Schools must complete and submit all forms associated with field lessons funded through Title I, Part A, at least 30 working days prior to the date of the field lesson. Required field lesson forms are the Field Lesson Implementation Plan, Sponsor's Request for Approval of Field Trip, Bus Transportation Request Form confirmation summary page, Direct Pay form where fees are to be charged, and any backup documentation for the such as confirmation letter, invoice for advance payment, or brochure stating prices. In addition, the *High Schools Office* requires that all schools submit a Field Lesson Plan for all field trips that are conducted during instructional time.
7. **Tournaments.** Athletic, academic, and UIL related tournament events **do not** require the submission of a Field Trip Request Form or Field Lesson Implementation Plan to the *High Schools Office*. However, the Teacher, Sponsor, or Coach is responsible for coordinating all plans and arrangements and compiling all necessary information pertaining to the trip for presentation to the Principal or other appropriate administrator, as required by the type of tournament event. Please indicate next to the name of field trip, on the Sponsor's Request for Field Trip form, that trip is an athletic academic or UIL related.
8. Forms may be submitted to the *High Schools Office* by courier, HISD inter-office mail, scanned/e-mailed or faxed to the attention of the School Support Officer.
9. **Questions Regarding this Memorandum**...may be referred to your School Support Officer or the Assistant Superintendent.
10. **Memo Maintenance Responsibility.** Assistant Superintendent.

REFERENCES: (a) Board Policy CNA(LEGAL)      Transportation Management:  
Student Transportation

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|-----------------------------------|---------------------------------------------------------------------------------------------------|
| (b) Board Policy FM(LEGAL)        | Student Activities                                                                                |
| (c) Board Policy FM(LOCAL)        | Student Activities                                                                                |
| (d) Board Policy FMF(LOCAL)       | Student Activities: Contests and Competition                                                      |
| (e) Board Policy FMG(LOCAL)       | Student Activities: Travel                                                                        |
| (f) Board Policy FMG (Regulation) | Student Activities: Travel                                                                        |
| (g) Form 40.4250                  | Release of Liability for Student Participation in Trip with Destination Outside the United States |
| (h) Form 40.5110                  | Sponsor's Request for Approval of Field Trip                                                      |
| (i) Form                          | Parent Approval Form: English                                                                     |
| (j) Form                          | Parent Approval Form: Spanish                                                                     |

## Houston ISD Field Trip Request Checklist

School: \_\_\_\_\_ Destination: \_\_\_\_\_ Dates: \_\_\_\_\_

Requirements	Local	Non-Local Out of District & Out-of-State	Out of Country	Notes
<b>Pre-Planning Approval Request for Student Trip</b> <input type="checkbox"/> Submitted not later than 60 days for out-of-district or out-of-state trips. <input type="checkbox"/> Submitted not later than 120 days for out-of-country trips.		<input type="checkbox"/>	<input type="checkbox"/>	
<b>Sponsor's Request for Approval of Field Trip (Form 40.5110)</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Parent Approval Form</b> <input type="checkbox"/> Form must be completed by the Parent and on file at the school prior to participation by the Student for all trips. <input type="checkbox"/> Copies submitted to <i>High Schools Office</i> prior to non-local out-of-district and out-of-state field trips.		<input type="checkbox"/>	<input type="checkbox"/>	
<b>Educational Purpose (<i>Field Lesson Implementation Plan</i>)</b> <input type="checkbox"/> List of specific learning objectives and activities.		<input type="checkbox"/>	<input type="checkbox"/>	
<b>Itinerary</b> <input type="checkbox"/> Sufficient details on lodging, transportation, destinations, & key dates/times.		<input type="checkbox"/>	<input type="checkbox"/>	
<b>Transportation</b> <input type="checkbox"/> Vans with a rated passenger capacity of no more than 10 persons (to include the driver) may be used. <input type="checkbox"/> Proof of auto liability insurance required for private passenger vehicle use.		<input type="checkbox"/>	<input type="checkbox"/>	
<b>Field Trip Costs</b> <input type="checkbox"/> Cost per student <input type="checkbox"/> How the trip will be financed.		<input type="checkbox"/>	<input type="checkbox"/>	
<b>Chaperones</b> <input type="checkbox"/> List of Chaperones and Titles. <input type="checkbox"/> 1 chaperon per 12 students is required. <input type="checkbox"/> Evidence of valid TX Drivers License and liability insurance if duties involve driving.		<input type="checkbox"/>	<input type="checkbox"/>	
<b>Students</b> <input type="checkbox"/> Typed list of Students and Grade Levels <input type="checkbox"/> Students must be passing all subjects and eligible to participate in extracurricular activities.		<input type="checkbox"/>	<input type="checkbox"/>	
<b>Medical</b> <input type="checkbox"/> Verification that any unusual medical information on students, which may be necessary in the event of an emergency during out-of-district trips has been obtained on Medical Release Forms.		<input type="checkbox"/>	<input type="checkbox"/>	
<b>Foreign Travel</b> <input type="checkbox"/> Applicable only to 9 <sup>th</sup> – 12 <sup>th</sup> Grade students. <input type="checkbox"/> Release of Liability forms submitted to the <i>High Schools Office</i> prior to out-of-country trip.		<input type="checkbox"/>	<input type="checkbox"/>	
<b>School Support Officer's Approval / Signature</b> <input type="checkbox"/> If trip is non-local, out-of-district, out-of-state, or out-of-country.		<input type="checkbox"/>	<input type="checkbox"/>	
<b>Assistant Superintendent's Approval / Signature</b> <input type="checkbox"/> If trip is one to two school days <input type="checkbox"/> If trip is non-local, out-of-district, out-of-state, or out-of-country.		<input type="checkbox"/>	<input type="checkbox"/>	
<b>Superintendent of Schools' or Designee's Approval/Signature</b> <input type="checkbox"/> If more than two school days. <input type="checkbox"/> If trip is non-local overnight or out of state – approval authority delegated to the Superintendent of Schools' Designee		<input type="checkbox"/>	<input type="checkbox"/>	

**NOTE:** Local trips are considered trips within Harris County and its adjacent counties (Liberty, Chambers, Galveston, Brazoria, Fort Bend, Waller, Grimes and Montgomery.)

**HOUSTON INDEPENDENT SCHOOL DISTRICT**  
**SPONSOR'S REQUEST FOR APPROVAL OF FIELD TRIP**  
**(To be completed by Sponsor and Submitted to Principal for Processing)**

REQUEST FOR PERMISSION FOR \_\_\_\_\_  
*(Name of School to take Field Trip)*

GROUP OR CLASS\* \_\_\_\_\_

TEACHER(S) **Teacher's Phone #:** \_\_\_\_\_

PLACE TO BE VISITED  
**(Give physical address)** \_\_\_\_\_

PURPOSE OF VISIT/SPECIFIC LEARNING  
ACTIVITIES *(Attach Field Lesson Plan)* \_\_\_\_\_

**DAY(S)** OF VISIT \_\_\_\_\_ **DATE(S)** OF VISIT \_\_\_\_\_

DEPARTURE TIME \_\_\_\_\_ RETURN TIME \_\_\_\_\_ SCHOOL TIME REQUIRED \_\_\_\_\_

NUMBER OF STUDENTS\* \_\_\_\_\_ MINIMUM NUMBER OF CHAPERONES REQUIRED \_\_\_\_\_  
*Ratios: Secondary Schools 12 to 1*

CHAPERONES  
*(Title, First Name, and Last Names)* \_\_\_\_\_

COST TO STUDENTS \_\_\_\_\_

TYPE OF TRANSPORTATION     HISD Bus                       Private Vehicle                       Rental Vehicle

Transportation specifics **Pickup Location at WHS:** \_\_\_\_\_

*\*Students must be eligible to participate in extracurricular activities and be passing all subjects.*

NOTE: *Overnight, out-of-town/district or out-of-country trips must attach the following:*

- Accounting Statement
- Itinerary Details
- Medical Release Forms
- List of students with verification that student are eligible to participate on this field trip.
- Parent Approval Forms with signatures.
- Release of Liability Form
- Transportation Liability Proof, if applicable

I have read Board Policies and Administrative Procedures Section 425.00 and subsections pertaining to student trips; this trip will be conducted in accordance with the established basic guidelines and any additional requirements developed at the individual school level.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Sponsor's Signature

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Principal's Signature

**APPROVAL:**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
School Support Officer's Signature

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Assistant Superintendent's Signature (if applicable)

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Chief of Schools' Signature (if applicable)

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Superintendent's Signature (if applicable)

## Field Lesson Implementation Plan

Name of School \_\_\_\_\_ Date Submitted \_\_\_\_\_

Title of Field Lesson \_\_\_\_\_

Grade Levels \_\_\_\_\_ Date of Field Lesson \_\_\_\_\_

Number of Students \_\_\_\_\_ Number of Teachers \_\_\_\_\_ Number of Parents \_\_\_\_\_

**INSTRUCTIONAL OBJECTIVES:**

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**ACTIVITIES:**

**Prior to the Field Lesson**

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**During the Field Lesson**

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**Following the Field Lesson**

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**EVALUATION:**

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\_\_\_\_\_  
Signature of Teacher(s)

\_\_\_\_\_  
Signature Approval of Principal

**HOUSTON INDEPENDENT SCHOOL DISTRICT  
MEDICAL RELEASE FORM**

\_\_\_\_\_ School Name

Name: \_\_\_\_\_

Address: \_\_\_\_\_

*Please include area code*

Home Phone No.: \_\_\_\_\_ Alternative Phone No.: \_\_\_\_\_

Parent's Cellular No.: \_\_\_\_\_ Parent's Cellular No.: \_\_\_\_\_

Parent's Work No.: \_\_\_\_\_ Parent's Work No.: \_\_\_\_\_

I \_\_\_\_\_ release my daughter/son guardianship rights for the following date(s) \_\_\_\_\_ .

District employees can only administer medication that has been prescribed by a doctor. District policy requires:

- Written physician and parent consent on file for each medication to be given
- All prescribed medication must be in the original container in which the prescription label is affixed.
- Students with asthma, life-threatening food allergies and diabetes may self-carry emergency medications with required consents
- All other prescribed medications must be administered by an authorized district employee.
- If school personnel already administer medication in accordance with this policy, then no further action is required.

A physician and parent consent has been provided for the following prescribed medications:

1. _____ (name of medication)	Dosage _____ (amount given)	Taken at _____ (time)
2. _____ (name of medication)	Dosage _____ (amount given)	Taken at _____ (time)
3. _____ (name of medication)	Dosage _____ (amount given)	Taken at _____ (time)

My daughter/son has her/his hospital or medical card: \_\_\_\_\_ yes \_\_\_\_\_ no

In case of an Emergency please call \_\_\_\_\_ at \_\_\_\_\_  
(if parent can not be reached) (include area code)

In order to ensure a safe and enjoyable trip, please list any health conditions that your child may have.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

My signature below gives you permission to take my daughter/son to a hospital or medical facility, gives my permission for my child to receive medical treatment and gives my permission for the above medication to be administered to my child.

\_\_\_\_\_  
Parent Printed Name Parent Signature Date

\_\_\_\_\_  
Sponsor Printed Name Sponsor Signature Date

\_\_\_\_\_  
Principal Printed Name Principal Signature Date

**DISTRITO ESCOLAR INDEPENDIENTE DE HOUSTON**

**AUTORIZACIÓN PARA ATENCIÓN MÉDICA**

\_\_\_\_\_ Escuela

Nombre: \_\_\_\_\_

Dirección: \_\_\_\_\_

Incluya el prefijo local

Teléfono de casa: \_\_\_\_\_ Teléfono alternativo: \_\_\_\_\_

Teléfono celular: \_\_\_\_\_ Teléfono celular: \_\_\_\_\_

Teléfono del trabajo: \_\_\_\_\_ Teléfono del trabajo: \_\_\_\_\_

Yo, \_\_\_\_\_ cedo la tutela de mi hijo(a) para la siguiente fecha(s) \_\_\_\_\_. Mi hijo(a) toma los siguientes medicamentos y se le deben administrar en este viaje siguiendo las indicaciones:

- 1. \_\_\_\_\_ Dosis \_\_\_\_\_ A las \_\_\_\_\_  
(medicamento) (cantidad) (hora)
- 2. \_\_\_\_\_ Dosis \_\_\_\_\_ A las \_\_\_\_\_  
(medicamento) (cantidad) (hora)
- 3. \_\_\_\_\_ Dosis \_\_\_\_\_ A las \_\_\_\_\_  
(medicamento) (cantidad) (hora)

Mi hijo(a) tiene su tarjeta médica: \_\_\_\_\_ sí \_\_\_\_\_ no

En caso de emergencia por favor llame \_\_\_\_\_ al \_\_\_\_\_  
a \_\_\_\_\_  
(si no se puede comunicar con los padres) (Incluya el prefijo local)

Para que el viaje sea agradable y seguro, por favor incluya cualquier condición médica de su hijo(a).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Mi firma autoriza llevar a mi hijo(a) a un hospital o centro médico y recibir atención médica y que se le administren los medicamentos listados arriba.**

_____ Nombre del padre o madre (anote)	_____ Firma del padre o madre	_____ Fecha
_____ Nombre del organizador	_____ Firma del organizador	_____ Fecha
_____ Nombre del director	_____ Firma del director	_____ Fecha



**RELEASE OF LIABILITY FOR STUDENT PARTICIPATION IN TRIP WITH  
DESTINATION OUTSIDE THE UNITED STATES**

STATE OF TEXAS COUNTY OF HARRIS

WHEREAS It is recognized that trips to destinations outside the United States of America pose risks to travelers; and

WHEREAS the parent(s) and or guardian(s) of the student named below recognizes these risks but still wishes to allow his/her child/ward to travel to a destination outside the United States of America with a group of individuals associated with the Houston Independent School District (HISD);

NOW THEREFORE, the parent(s) or guardian(s), as consideration for the named student to participate in the trip, agrees as follows:

I, the undersigned, agree to assume the risk to my child/ward of his or her traveling to a destination outside the United States of America described in this Release of Liability (Release).

In consideration for my child/ward being permitted to participate in the trip to a destination outside the United States of America, I voluntarily execute this Release with the express intention of releasing the HISD, its trustees, agents and employees and the sponsors and chaperones for this designated trip from all obligations designated in this Release. I hereby expressly release and agree to hold harmless on my behalf, and on behalf of my child/ward, the HISD, its trustees, agents and employees and the sponsors and chaperones who participate in the described trip, from all claims or actions of whatsoever nature, in tort or in contract, which I or my child/ward ever had, now have, or may leave in the future against the HISD, its trustees, agents and employees and the chaperones and sponsors on the trip described, from any liability for injuries or damages which occur to my child/ward or to me as a result of his or her participation in this trip. I expressly waive all claims for medical expenses and wages to which I may otherwise be entitled, and I agree to indemnify and hold harmless the HISD, its trustees, agents and employees and the sponsors and chaperones from all claims made against it or them on behalf of my child/ward.

I agree that neither the HISD or its trustees, agents, employees or the sponsors or chaperones is liable for injuries or damages caused by my child/ward on this designated trip. I agree to indemnify and hold harmless the HISD, its trustees, agents and employees and the sponsors and result from my child/wards actions on the designated trip.

I recognize that the HISD has sovereign or governmental immunity under Texas law, and that its trustees, agents and employees and the sponsors and chaperones involved in this trip also have some degree of sovereign or governmental immunity under Texas law. I understand that by requiring the execution of this Release as consideration for my child/ward to participate in the designated trip, the HISD, its trustees, agents and employees and the sponsors and chaperones are not waiving any sovereign or governmental immunity which it or they have under Texas law.

Release of Liability (continued)

I, the undersigned, have read this Release and understand all of its terms. I have executed it voluntarily and with full knowledge of its significance.

This Release is executed on my behalf and on behalf of my child/ward \_\_\_\_\_  
\_\_\_\_\_. This trip to destination outside of the United  
States of America to which this Release applies is the trip by \_\_\_\_\_  
\_\_\_\_\_ to be taken to \_\_\_\_\_  
on the dates of \_\_\_\_\_ through \_\_\_\_\_, 201\_\_\_\_\_.

DATE:

\_\_\_\_\_, 201\_\_\_\_\_

BY: \_\_\_\_\_  
Parent or Guardian

\_\_\_\_\_, 201\_\_\_\_\_

BY: \_\_\_\_\_  
Parent or Guardian

BEFORE ME, the undersigned authority personally appeared \_\_\_\_\_  
\_\_\_\_\_ and \_\_\_\_\_,  
and, after being duly sworn, deposed and said that (he/she/they) signed this Release for the  
purpose and consideration state in the Release.

SWORN TO AND SUBSCRIBED before me this \_\_\_\_\_ day of \_\_\_\_\_, 201\_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC in and for the State  
of TEXAS

Name: \_\_\_\_\_

My Commission Expires:

## MEMORANDUM

TO: Dr. Geovanny Ponce, Assistant Superintendent  
South High Schools

FROM: Jerri Nixon  
Westbury High School

SUBJECT: **Trip Name**

CONTACT: (Name), (Title), (Telephone Number)

(School Name) requests preplanning approval for its 8<sup>th</sup> Grade Social Studies students to participate in Close Up Washington, January 19-23, 2015, in Washington, DC. The school has participated in the program for the previous two school years with great success. All 8<sup>th</sup> Grade Social Studies students will be informed that they are allowed to participate. However, it is estimated that only 30 students will participate. The trip encompasses four school days.

Close Up Washington is a 7-day, 6-night program that develops students' knowledge of basic concepts of government and citizenship. Students will gain greater understanding of the rights and responsibilities of citizens in a participatory democracy; learn how constituents, interest groups and party politics affect the legislative process; understand the impact of the Framers' views of limited government on the structure of government outlined in the Constitution; and explore diverse viewpoints concerning domestic and international policy questions facing Congress, the executive branch and the courts. Students will also see the city's monuments and memorials, explore the Smithsonian museums, and enjoy the cultural diversity of D.C.'s historic neighborhoods. The pinnacle of the week is Capitol Hill Day where students have the opportunity to spend time with their Senator(s), Representative, and/or staff.

The estimated cost of participation is \$1,500 per student. Costs of student travel will be covered by activity funds through fund raisers and donations. Students and parent chaperones will not be charged for any portion of the field trip. Costs incurred by the trip sponsor and any accompanying faculty chaperones will be paid through general funds.

All policies and procedures governing student trips contained in Board Policy FMG (Regulation), Student Activities Travel, will be implemented and followed once approval is granted to begin planning.

The trip sponsor and point of contact for additional information is (Sponsors Name).

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**Approved:**

\_\_\_\_\_  
Berzayda G Ochoa, School Support Officer  
High Schools Office

\_\_\_\_\_  
Date

**Approved to proceed with planning and formal approval process:**

\_\_\_\_\_  
Dr. Geovanny Ponce, Assistant Superintendent  
High Schools Office

\_\_\_\_\_  
Date

\_\_\_\_\_  
Denise Watts, Ed.D.  
Chief of Schools

\_\_\_\_\_  
Date

\_\_\_\_\_  
Millard House II  
Superintendent of Schools

\_\_\_\_\_  
Date

**IMPORTANT NOTE:** Preplanning Approval Request memorandums should be addressed to (Name), Assistant Superintendent. *However, trips outside of the United States require the Superintendent's approval/signature; therefore, the Preplanning Approval Request memorandums for these types of trips should be addressed to Millard House II.* If you have any questions regarding the preplanning memorandum, please contact your SSO's administrative assistant.