

DOVER SCHOOL DISTRICT	POLICY CODE: IJOA
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FIELD TRIPS AND EXCURSIONS

Field trips and excursions for the purpose of this policy are all “day” trips or those with limited overnight activities within the State of New Hampshire funded by the school.

Field trips designed to stimulate student interest and inquiry and provide opportunities for social growth and development are considered appropriate extensions of the classroom. To the extent that they provide the most effective means for accomplishing general curriculum objectives of the school, field trips shall be authorized by the building principal.

To be educationally beneficial, a field trip requires thoughtful selection, careful advance preparation of the class, and opportunities for pupils to assimilate the experience during and at the conclusion of the trip. To this end, teachers, and principals will be expected to consider the following factors in selection of field trips

- (a) Value of the activity to the particular class group or class groups
- (b) Relationship of the field trip activity to a particular aspect of classroom instruction
- (c) Suitability of the activity and distance traveled in terms of the age level
- (d) Mode and availability of transportation
- (e) Cost

Parents or guardians shall always have the right to excuse their child from any field trip or excursion. Consent forms for those attending must be filed with the Principal before any trip.

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School: _____

DOVER SCHOOL DISTRICT
FIELD TRIP NOTIFICATION AND PERMISSION FORM

Dear Parents & Guardians,

Your child's class will be participating in a school sponsored activity away from school. The information for this activity is as follows. ****Please note that no child will be allowed to attend a trip without a signed permission slip.****

Please sign and return to your child's teacher by: _____.

Description of Activity:

Purpose of Activity:

Destination: _____ Transportation Provided By _____

Date: _____ Departure Time: _____ Return Time _____

Cost: _____ Please make check payable to: _____

We Need Chaperones for this Trip: YES NO

_____ I understand I must complete fingerprinting for a criminal records check at least three (3) weeks in advance of the field trip at the SAU 11 office before attending this trip.

_____ I have completed the fingerprinting for a criminal records check at the SAU 11 office.

Recommended clothing, equipment, supplies, etc.:

School/Field Trip Permission Form

I/we have been informed as to the nature of the activity and acknowledge that there are always certain risks for those who participate. We realize that all efforts will be made by the teachers and chaperones to ensure the safety of the students, but understand that the school cannot assume responsibility for unreasonable accidents and/or injuries. I/we agree that our child must adhere to all safety rules and regulations, as well as all instructions from the adults. Failure to do so may result in exclusion from this or other activities. If there is important information, medical or otherwise, that the school staff should know, I/we agree to provide it to the nurse and/or teachers before the trip. I/we understand the risks and requirements for our child to participate and give our consent to attend the trip to:

I hereby give permission for my child to be transported to a hospital or other emergency medical facility and to receive emergency medical treatment. Emergency contact phone number: _____

Student Name: _____ **Teacher Name:** _____ **Grade:** _____

Trip Date & Destination: _____

Parent/Guardian Signature: _____ **Date:** _____

Home # _____ **Work #** _____ **Cell #** _____

In case of an emergency and you cannot be reached, whom do you want us to call?

Name: _____ **Home #** _____ **Work #** _____ **Cell #** _____