

Ohio Conference Office of Education
**OFF-CAMPUS ACTIVITIES REQUEST
 FOR OVERNIGHT TRIP**
(Due in Conference Office 30 days Prior)

Attach detailed itinerary and lesson plans.

SCHOOL NAME: _____ # OF STUDENTS: _____

TEACHER: _____

CHAPERONES: _____ GRADES: _____

DESTINATION: _____

DATES: _____

OBJECTIVE: _____

TRANSPORTATION: _____

| | |
|------------------------------|---|
| PURPOSE: | Off-campus activities on a school day must be in conjunction with your class work. There must be a purpose, proper preparation, and follow-up work for each activity. |
| OFFICE CLEARANCE: | Before parents or students are notified of any off-campus activity, it must first be cleared with the principal and voted by the local school board. |
| CAR: | Driver(s) must carry minimum insurance limits of \$100,000/\$300,000 PL/PD, and medical coverage on passengers. |
| CONSENT TO TREATMENT: | A copy of each child's "Consent to Treatment" form <i>must</i> be taken on each off-campus activity. This is extremely important in the event of an injury! |
| PARENT NOTIFICATION: | All parents must be notified two (2) weeks in advance for daytime field trips and four (4) weeks in advance for an overnight field trip, i.e., 8th Grade Class Trip. |
| PERMISSION SLIPS: | Permission slips must be signed by parents or guardians and returned to the principal the day before any trip may be taken. No telephone permission may be accepted from parents. A copy of the permission slip must be filed in the cum folder and the original taken on the trip along with Consent to Treat forms. |

Yes No Each driver meets the Volunteer Driver requirements, including insurance limits, and has completed the Volunteer Driver Questionnaire (AD-07a) for this school year, which is on file at the school.

Principal's Signature: _____ Date: _____

Board Chair's Signature: _____ Date: _____

School Board Approval: Date _____ Action # _____

FOR OFFICE USE ONLY

Approved Denied

Superintendent's Signature: _____ Date: _____