

Clark County School District

REQUEST FOR APPROVAL OF STUDENT TRAVEL – PRELIMINARY APPROVAL

STEP 1: This page must be approved by the Principal/Director in advance of agreement with vendors and before funds of any kind are spent toward student travel.

School/Department	Location Number	Region	Student Group	Anticipated Number of Participants	Students Adults
Principal/Director	Cell Phone		Primary Destination		
Teacher/Sponsor	Cell Phone		Address		
Educational Value/ Nevada Standards Supported			Travel Dates	Duration	Total Days School Days

APPROVAL REQUIREMENTS ACKNOWLEDGEMENT – This section is required for all student travel.						INITIAL	
<input type="checkbox"/> I acknowledge that no agreements have been made, funds spent, nor parent/student communication been shared regarding this travel.							
Destination Type/Duration							
<input type="checkbox"/> CCSD school or other CCSD location same day <i>Requires preliminary Principal approval.</i>	<input type="checkbox"/> Non-CCSD in-state same day <i>Requires preliminary Principal approval.</i>	<input type="checkbox"/> Non-CCSD in-state overnight <i>Requires preliminary Principal and Region approval.</i>	<input type="checkbox"/> Out-of-state same day <i>Requires preliminary Principal and Region approval.</i>	<input type="checkbox"/> Out-of-state overnight <i>Requires preliminary Principal and Region approval.</i>	<input type="checkbox"/> International overnight <i>Requires preliminary Principal, Region, Deputy Superintendent, and Superintendent approval.</i>	Teacher/ Sponsor	Principal

TRANSPORTATION AND LODGING PLAN – This section is required for all student travel.		INITIAL	
Planned Method of Transportation		Planned Lodging Location with Address	
<input type="checkbox"/> CCSD School Bus <input type="checkbox"/> Pre-Approved CCSD Charter Bus <input type="checkbox"/> Rental Vehicle (<i>Maximum 3 vehicles</i>)	<input type="checkbox"/> Airplane <input type="checkbox"/> Other: _____		
		Teacher/ Sponsor	Principal

ITINERARY AND LIABILITY PLAN – This section is required for student travel to all non-CCSD destinations .				INITIAL	
<input type="checkbox"/> I understand that for student travel that includes Hazard Class 3 activities, additional insurance will need to be purchased in consultation with the Risk Management Department and student travel that includes Hazard Class 4 activities will <u>not</u> be approved.				Teacher/ Sponsor	
<input type="checkbox"/> Detailed (anticipated) itinerary is attached , which includes all planned activities.					
<input type="checkbox"/> Travel advisory (international travel only) for destination country has been obtained from travel.state.gov and is attached .					
Anticipated Highest Hazard Class Planned Activity					
<input type="checkbox"/> Hazard Class 1	<input type="checkbox"/> Hazard Class 2	<input type="checkbox"/> Hazard Class 3 <i>Requires additional insurance</i>	<input type="checkbox"/> Hazard Class 4 <i>Prohibited</i>		

CHAPERONE ACKNOWLEDGEMENT – This section is required for all student travel.				INITIAL	
<input type="checkbox"/> I understand that the following chaperone requirements may apply:				Teacher/ Sponsor	
	Grades K-3	Grades 4-5	Grades 6-12		
Same-Day Travel	1 adult for every 8 students	1 adult for every 12 students	1 adult for every 20 students		
Overnight Travel	Prohibited	1 female adult for every 5 female students; 1 male adult for every 5 male students	1 adult for every 20 students		

PRELIMINARY APPROVAL TO EXECUTE AGREEMENTS, UTILIZE FUNDS, AND COMMUNICATE WITH PARENTS/STUDENTS – This section is required for all student travel.							
Principal/Director	Date	Region Superintendent	Date	Deputy Superintendent	Date	Superintendent	Date
<i>Required for all student travel.</i>		<i>Required for overnight, hazard class 2+, out-of-state, international.</i>		<i>Required for international travel.</i>		<i>Required for international travel.</i>	

Clark County School District REQUEST FOR APPROVAL OF STUDENT TRAVEL – FINAL APPROVAL

STEP 2: This page should be completed AFTER preliminary approval is signed and returned to teacher/sponsor. Agreements with vendors, communication with parents/students, and execution of funds for student travel may take place.

SOURCE OF FUNDS – This section is required for all student travel.

Student travel is being funded by: School Budget SGF Student/Family Fundraising Grant Donation Other _____

Entry Fee: \$ _____ Per person Group

FINAL STUDENT TRAVEL ACKNOWLEDGEMENTS – This section is required for all student travel.	INITIAL															
<p>I acknowledge that:</p> <p><input type="checkbox"/> Final list of student participants with student numbers is attached. Confirmed number of students _____</p> <p><input type="checkbox"/> The administrator/designee attending is: _____ cell phone number: _____</p> <p><input type="checkbox"/> Final list of chaperones is attached with contact information/cell phone numbers. Also include administrator/designee cell phone number.</p> <p><input type="checkbox"/> Chaperone-to-student meets requirements.</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-left: 20px;"> <thead> <tr> <th style="width: 30%;">Final Chaperone-to-Student Calculation</th> <th style="width: 10%;">K-3</th> <th style="width: 10%;">4-5</th> <th style="width: 10%;">6-12</th> <th style="width: 40%;">See requirements on page 1</th> </tr> </thead> <tbody> <tr> <td>Number of female students</td> <td></td> <td></td> <td></td> <td>Number of female adults</td> </tr> <tr> <td>Number of male students</td> <td></td> <td></td> <td></td> <td>Number of male adults</td> </tr> </tbody> </table> <p><input type="checkbox"/> For each student, a CCF-796 Field Trip Permit and CCF-455 Medical Authorization are attached.</p> <p><input type="checkbox"/> For each CCSD employee acting as a chaperone, an absence request has been submitted and approved.</p> <p><input type="checkbox"/> For each non-CCSD employee acting as a chaperone, a copy of CCSD volunteer badge is attached.</p> <p><input type="checkbox"/> Transportation and lodging arrangement records are attached in alignment with the plan above.</p> <p><input type="checkbox"/> Final, detailed itinerary is attached.</p> <p><input type="checkbox"/> If categorized as Hazard Class 3, additional funds to cover the actual cost of the liability insurance is \$ _____. Contact Risk Management for guidance.</p> <p><input type="checkbox"/> All school negotiated contracts/agreements related to this student travel activity have been reviewed by the Office of the General Counsel and Risk Management (as appropriate) and are attached.</p> <p><input type="checkbox"/> Arrangements have been made with Food Services/school kitchen manager.</p> <p><input type="checkbox"/> Arrangements have been made with the school nurse involving student health needs, student medications, and first aid kit.</p> <p><input type="checkbox"/> Documents provided to parents/guardians (itinerary, etc.) and a plan for communication with parents/guardians during travel is attached.</p>	Final Chaperone-to-Student Calculation	K-3	4-5	6-12	See requirements on page 1	Number of female students				Number of female adults	Number of male students				Number of male adults	<p>_____ Teacher/ Sponsor</p> <p>_____ Principal</p>
Final Chaperone-to-Student Calculation	K-3	4-5	6-12	See requirements on page 1												
Number of female students				Number of female adults												
Number of male students				Number of male adults												

FINAL INTERNATIONAL STUDENT TRAVEL CHECKLIST – This section is required for all international student travel.	INITIAL
<p><input type="checkbox"/> For each student, a CCF-799 International Field Trip Permission Form is attached.</p> <p><input type="checkbox"/> For each student and chaperone, a copy of the passport is attached, with expiration dates within acceptable ranges for the destination country (refer to information page for destination country at travel.state.gov).</p> <p><input type="checkbox"/> Current travel advisory for destination country has been obtained from travel.state.gov and is attached.</p>	<p>_____ Teacher/ Sponsor</p> <p>_____ Principal</p>

FINAL APPROVAL TO TRAVEL – This section is required for all student travel.

Principal/Director <small>Required for all student travel.</small>	Date	Region Superintendent <small>Required for overnight, hazard class 2+, out-of-state, international.</small>	Date	Deputy Superintendent <small>Required for international travel.</small>	Date	Superintendent <small>Required for international travel.</small>	Date
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Clark County School District REQUEST FOR APPROVAL OF STUDENT TRAVEL – INSTRUCTIONS

Steps for preliminary approval:

- Download the *REQUEST FOR APPROVAL OF STUDENT TRAVEL*.
- This form should be completed by the teacher/sponsor requesting student travel.
- All research and preliminary planning should take place **without** expenditures or executed contracts.
- Determine hazard class (table provided below) and build cost into price of student travel budget.
- Complete page 1 only.
- The entire form should be printed (2-sided) and page 1 should be initialed by the teacher/sponsor prior to submitting to the Principal/Director. The second page will be completed after preliminary approval is provided.
- The entire form should be submitted to the Principal/Director with an anticipated itinerary attached.

Steps for final approval:

- Page 2 should be completed **after** preliminary approval is signed and returned to teacher/sponsor.
- Agreements with vendors, communication with parents/students, transportation secured, and execution of funds for student travel may take place.
- Once page 2 has been completed by the teacher/sponsor with required supporting documents attached, it should be turned into school administration for Principal approval.
- The student travel request will be forwarded to the appropriate department(s) for final approval.

TIMELINE

Destination Type/Duration	Approval Required	Timeline
CCSD location, same day	Principal	30 days recommended
Non-CCSD, in state, same day	Principal	30 days recommended
Non-CCSD, in state, overnight	Principal and Region	60 days required
Out of state, same day	Principal and Region	60 days required
Out of state, overnight	Principal and Region	60 days required
International, overnight	Principal, Region, Deputy Superintendent, and Superintendent	90 days required

LIABILITY INFORMATION

	Hazard Class 1	Hazard Class 2	Hazard Class 3		Hazard Class 4
	Low Hazard (Only in Nevada)	Low to Moderate Hazard	High Hazard		Severe Hazard (<i>PROHIBITED</i>)
Examples	<ul style="list-style-type: none"> • Restaurants • Retail Stores • Nevada Museums • Nevada Attractions (Shark Reef, Secret Garden, Springs Preserve, etc.) • Local Parks • Community Centers • National Parks in NV • Other CCSD Sites • County & State Government Buildings • ROTC routine events 	<ul style="list-style-type: none"> • Camping • Hiking & Backpacking • Recreation Center Water Activities • Museums and Attractions Outside NV • Amusement Parks • National Parks Outside NV • Skating, Biking, & Running • ROTC Drill and PFT events • Out of State Retail Locations or Restaurants • Tournaments and Camps* (Excluding Tackle Football) 	<ul style="list-style-type: none"> • ROTC Air Rifles • Martial Arts • Rock Scrambling • Skiing and Snowboarding with use of a liability waiver • Political Rallies • Tackle Football Events (Outside of Season) • Commercial Boating or Rafting with an Approved Agreement or Commercial Ferry used to Travel from One Location to Another • Swimming Activities with Red Cross Lifeguard Certified Supervision (Who is Not a Participant of the Field Trip) 	<p style="text-align: center;">Hazard Class 3F International Travel</p> <ul style="list-style-type: none"> • International Trips • Any other high hazard activity that requires a separate insurance policy. • Tackle Football includes tournaments, camps, & combines. (Must meet NIAA Guidelines, if applicable.) • Policies may have a minimum premium of \$265.00. 	<ul style="list-style-type: none"> • Zip Lines • Inflatable Devices • High Ropes Courses • Acrobatics & Gymnastics (Above Floor Level) • Scuba, Night Snorkeling, and Boating or River Rafting* • Equestrian Activities • Aviation Activities • Active Mines • Out-of-State Water Parks • Rock Walls, Rock Climbing Activities, and Bouldering • Trampolines & Indoor Trampoline Parks
	Information	<p>Activities of this nature typically result in no losses with appropriate supervision of students and chaperones/volunteers.</p> <p>Insurance not required; must be approved/ sponsored by CCSD (Teacher/Sponsor and Principal).</p> <p>A Class 1 activity does not need to be monitored by Risk Management.</p>	<p>Requires a request for Approval of Student Travel Form (CCF-798), signed by Teacher/Sponsor, Principal, and Region/School Associate Superintendent.</p> <p>When hosting an event, there are flat rate premiums to cover out-of-state participants. Contact Risk Management for rates at 702-799-6496 x5634.</p>	<p>International Travel:</p> <ul style="list-style-type: none"> • Request for Approval of Student Travel Form (CCF-798), signed by Teacher/Sponsor, Principal, Region/School Associate Superintendent, and Superintendent of Schools. • \$35.00 per participant rate for groups of 20 or less. • Groups traveling with more than 20 participants must contact Risk Management for actual cost. 	<p>*Without a pre-approved agreement to cover liability of watercraft and water activities</p> <p>No possible way adequate risk management controls can be placed to avoid possible severe/catastrophic loss in event of occurrence.</p> <p>Hazard is so severe that insurance is not an option.</p> <p>Usually involves violation of regulation or statute.</p> <p>Only option for successful managing of risk is avoidance.</p>
Cost	No Charge	No Charge	Hazard Class 3 \$9.00 per participant with possible minimum	Hazard Class 3F \$35.00 per participant for 20 or less	Not Applicable