

Quaker Valley High School

Student Field Trip Form

With prior acknowledgement/consent of teachers and parents, the following student wishes to attend the field trip listed below. Students will be responsible for all class work assigned or completed on this date or as specified by the teachers.

Name of Student *Field Trip Title*

Date of Field Trip *Time of Departure* *Return Time*

Period	Subject <i>To be completed by student</i>	Acknowledged <i>Teacher's Signature</i>	Participation Not Recommended <i>Teacher's Signature</i>	Reason Not Recommended <i>(Use key below)</i>
1				
2				
3				
4				
5				
6				

Parent/Guardian Permission _____ Date _____

Sponsoring Teacher Signature _____ Date _____

* I give my permission for the sponsoring personnel to authorize medical treatment for my son/daughter in the event of a medical emergency.

Parent/Guardian Signature _____ Date _____

(To be signed after teachers have signed)

* My son/daughter has my permission to provide his/her own transportation. I am willing to accept the responsibility of my student's use of the family vehicle. I understand that no other student is to be transported without my written consent and the written consent of the parent/guardian of the passenger student.

Parent/Guardian Signature _____ Date _____

Key Reasons: Teachers, please state specifically your reason(s) for not recommending participation in this activity.

- A. Student doing poor work and/or attaining poor grades.
- B. Student missing an excessive number of classes.
- C. Student has been a disruptive influence in class.
- D. The classroom activity is of a specific type that cannot be made up.

Students should return completed form to the sponsoring teacher.