



Superintendent's Circular

NUMBER:
CAO-24
Version 01

OVERNIGHT FIELD TRIP GUIDELINES

This Circular will remain in effect unless rescinded or superseded by a subsequent version.

IMPORTANT NOTE: These guidelines might be impacted by COVID-19 restrictions and are subject to change based on public health, international security, or other emergent issues that could impact travel. For the most up-to-date information and guidance, contact OPL@bostonpublicschools.org for assistance/guidance.

This Superintendent's Circular provides instructions for implementing the Field Trip Policy passed by the Boston School Committee on November 20, 2019.

This circular should be read AFTER the Superintendent's Circular No. CAO-22, General Guidelines and Procedures for All Field Trips as additional guidelines are outlined there.

The principal/head of school and/or the district department sponsoring the trip are responsible for ensuring that all field trip policies and procedures as outlined in this circular are adhered to.

Together, the principal/head of school and/or the district department lead sponsoring the trip and the program leader

must review and complete checklists for this circular. Signed checklists must be kept on file at the school/district department.

OVERNIGHT FIELD TRIP: Any domestic trip off school grounds that involves students' participation overnight.

- Overnight Field Trip forms are submitted to the principal/head of school AT LEAST 12 weeks in advance and approved by the principal/head of school.
- All forms, including the signed CAO-24 checklist form, are filed at the school.
- Overnight Field Trip Request form, the list of student names, emergency contact name and number, grade, D.O.B, the list of chaperone names and their role in the school community, the itinerary, and if applicable, train and flight information are sent to the district to notify the district of trip plans AT LEAST 4 weeks in advance. Scan and email the Overnight Field Trip Request form and information to the appropriate principal/ leader as well as to the Department of Global Education. Please follow up to ensure documentation has been received.

OVERNIGHT FIELD TRIP CHECKLIST

- ☐ Review Superintendent's Circular No. CAO-22, General Guidelines and Procedures for All Field Trips.
- ☐ All field trip IDEAS must be preliminarily approved in writing by the principal/head of school or District Department sponsoring the trip prior to the distribution of any informational materials on the proposed trip to students

and their parents/guardians and prior to any fundraising or other detailed preparations. Consult with the principal/head of school on potential chaperones and student recruitment.

- ☐ Review Superintendent's Circular FSE-05 Medical Emergency Management and SAF-04 Incident Data Reporting and Release for important safety protocols. The Department of Global Education should be used as a resource for questions regarding risk management on overnight field trips.
- ☐ Select a site and investigate the appropriateness of the site in relation to the category of field trip.
- ☐ Select a date and an alternate date. Note: Check with the principal/head of school, teachers, and staff to ensure that trips are not scheduled on dates that interfere with important tests, religious holidays, or class work.

PLANNING PROCESS

For thorough planning and to maximize affordability and fundraising efforts, it is recommended that overnight trips are planned *at least six months in advance*.

ROLE OF THE PROGRAM LEADER (LEAD CHAPERONE)

Program Leader Description: The program leader is a BPS employee and the lead chaperone organizing and leading the trip. All program leaders (lead chaperones and the BPS employee organizing and leading the trip) and chaperones must be approved by the principal/head of school or district department sponsoring the trip. The program leader is responsible for

ensuring all guidelines in CAO-22 and CAO-24 are followed and keeping the principal/head of school and the district informed of trip developments. The program leader is responsible for completing the Overnight Field Trip Request form and accompanying documents that are submitted to the principal/head of school for approval. The program leader is also responsible for organizing the chaperone team, student team, and pre-departure meetings.

- ☐ **School Nurse and Guidance Counselor Consultation:** Before approval of a field trip, the program leader must consult with the school leader to determine if, and what type of medical assistance is needed for participating students. To ensure accessibility, this step is crucial, and must take place before the field trip is secured. For additional questions, please consult the Health Services Department. Additionally, to thoroughly support a student's participation in a field trip, consult with and, when necessary, receive training from the school nurse regarding any students who have medical needs *at least six weeks before departure* (much longer for international and overnight field trip programs). Also consult with the school counselor regarding mental and behavioral health needs. If any student has a serious medical or mental health condition, be sure that their doctor is aware of the essential participation criteria and location of the trip and writes a letter indicating that the child may safely attend and participate in trip activities. Keep this document on file with other key permissions slips and medical forms.
- ☐ **Overnight Field Trip Form:** Complete and submit an Overnight Field Trip Request form and accompanying documents to obtain official consent from the

principal/head of school to execute the trip. Once the principal/head of school has approved the trip, you must send a copy of the request, itinerary, and supporting documents to the Department of Global Education.

- **Mindset:** Planning, organization, and preparation are critical to a successful experience for all participants. As part of trip planning and itinerary development, ensure the major aspects of health, safety, student inclusion, and security have been addressed with due diligence. Program leaders must be able to articulate in an informed manner what decisions were made, why they were made, and the sources that informed that decision making. If you have questions about the appropriateness of an activity, please consult with your principal/head of school and the Department of Global Education.
- **School File:** Create a school file to house all important documents: Overnight Field Trip Request form and attachments, student roster, student permission slips, and medical forms, and other signed documents including incident reports, incident log, and the fire safety plan. These documents must be kept on file for the current fiscal year plus three additional years after the trip has occurred.
- **Communication:** Share the trip details listed below with all teachers, nurses, and other staff members so that they may plan accordingly.
 - Trip overview (purpose)
 - Destination
 - Date of trip
 - Students' names

- Chaperones' names and roles in school community
- **Documentation:** Prepare and distribute the Parental Authorization for Overnight Field Trip form, Medical Information form, Student Traveler Behavior Contract, Student Support for Overnight Programs, and the Medication Administration form to each participating student and chaperone. For preparedness and safety, you also must have these medical forms from chaperones. If applicable, prepare and distribute the Notarized Parent/Guardian Airline Travel Consent form. *(Some airlines and travel companies require this; some do not. Research your particular trip to see if this applies.)*
- **Meetings:** Conduct AT LEAST TWO pre-departure student meetings. Discuss the trip's educational purpose and goals, conduct expectations, itinerary, healthy travel, and all other logistics of the program. (For lengthy overnight programs, see CAO-25 for additional student meeting topics.) Conduct AT LEAST ONE parent/guardian meeting (with each family or all families together) to review the purpose of the trip, itinerary, review/sign permission forms, review logistics of travel, and share medical and safety information.

Please note: Plan for families who may need translation services at the meeting; students should not serve as their parent/guardian's translator at this meeting. If a parent/guardian is unable to attend the meeting, a chaperone (a BPS employee) must be sure to speak to the parent/guardian via telephone or in-person about the trip prior to taking the student on an overnight trip. Document this personal contact for your records.

SAFETY PREPAREDNESS

- ❑ **Travel Advisories/Warnings:** The head of school and superintendent reserve the right to cancel any field trip up to and including the day of departure to manage risk.
- ❑ **Insurance:** Through On Call International insurance, the district provides medical coverage for international and domestic BPS-sponsored trips (domestic being 100 driven miles away from home or place of study or employment) for BPS students, BPS staff participants, and chaperones. On Call will serve as the primary source for medical insurance. However, in some cases, if a hospital visit is required, students may be required to pay out of pocket, and be reimbursed by On Call later. Families will want to budget for this just-in-case expense. **The On Call insurance policy does NOT include cancellation or trip interruption insurance should the trip be canceled or interrupted for any reason other than medical.** Cancellation/interruption must be due to the traveler getting sick, injured, or someone in the traveler's immediate family being sick, injured, or death. Students/families would need to show proof of a sickness/injury; and the sickness/injury must be so disabling as to cause them to cancel/interrupt their trip. If there is a sickness/death for their family member, they would need to show proof of that, too. Save all receipts for flights/lodging for reimbursement purposes and a claim form would need to be filled out. Families will need to know in advance that Trip Cancellation has a \$2,000 limit, and Trip Interruption has a \$2,500 limit. Again, the superintendent reserves the right to cancel a trip for any reason and at any time for safety purposes; Cancel for Any Reason Insurance (CFAR) is

NOT provided by the district. Therefore, all trip participants must purchase their own (CFAR) insurance to protect their trip investment.

- ❑ **Training:** It is recommended that at least two chaperones (including the program leader) hold valid CPR AND first aid certification. First Aid: Ensure the availability of a first aid kit. Verify emergency and medical information and contact details.
- ❑ **Chaperone Ratios:** For overnight trips, the student-to-chaperone ratio is 7:1, with a two-chaperone minimum. It is recommended that a chaperone reserve, or backup, be identified in the event a chaperone is no longer able to participate at the last minute or must leave the field. Tour guides, or employees of third-party vendors contracted to help operate the trip, are not considered chaperones, and do not factor into the student to chaperone ratio.
- ❑ **Transportation:** School buses or BPS-approved transportation vendors' vehicles MUST be used to transport students to and from field trips or athletic events, regardless of how the trip is paid for. Privately owned vehicles, vehicles from non-approved vendors, ride-sharing transportation services such as Uber and Lyft, or leased vans are not to be utilized to transport students to and from field trips or athletic events, except in the case of a *bona fide* emergency. Refer to TRN-03 and CAO-22 for information and regulations on field trip transportation.
- ❑ **Water Activities:** If your trip involves any activities in or on the water, you must contact the Department of Global Education for approval at least 16 weeks in advance. There is

a separate and mandatory procedure for all trips involving water. Please review CAO-27 and contact the Department of Global Education immediately.

- **Healthy Travelers:** Be sure students have had a recent (current school year) doctor's visit and physical exam prior to departure. Students and staff should be current on all immunizations and vaccinations, including those related to the location they will be traveling to. Travelers should consult with their primary care doctor and can also visit the Center for Disease Control's website for information on staying healthy while traveling at <http://wwwnc.cdc.gov/travel/>. If any student has a serious medical condition, please be sure that their doctor writes a letter indicating that the child may safely attend and participate in trip activities.

CHAPERONE CRITERIA

- **Chaperone Recruitment:** Program leaders must consult with the principal/head of school on potential chaperones and student recruitment. The program leader (lead chaperone) must be a BPS employee. Other authorized chaperones may include parents and guardians who are required to be 21 years of age or older. Any parent on the trip must operate in the role of chaperone. All chaperones must be approved by the head of school/principal. Every effort should be made for students to have access to the field trip experience, for chaperones to be representative of the student group, and for chaperones to include males and females. The selection and approval of chaperones by the

principal/head of school should be based on the individuals' thorough knowledge of and rapport with most of the student participants. Choose a chaperone team purposefully and wisely, considering strengths. Every adult on the trip must be a chaperone and have a clear role.

- **Non-BPS Chaperones:** Other authorized chaperones may include parents and volunteers who are required to be 21 years of age or older. All non-BPS employee chaperones must submit a yearly CORI/SORI authorization form to the Office of Human Capital. Complete the [eCORI form online](#). Contact the BPS Office of Human Capital (OHC) for CORI check and confirmation support. The principal/head of school and the lead chaperone are responsible for submitting authorization forms to OHC and must not allow chaperones to take part in activities until they have been CORI/SORI cleared. Non-BPS employees who chaperone on a field trip are not covered for liability by the Boston Public Schools. The program leader must be sure that all chaperones, including non-BPS chaperones, are familiar with the BPS Code of Conduct and other district and school-based rules.
- **BPS Parent Chaperones:** Chaperones who are parents/guardians of BPS students on the trip must provide the same level of care and attention to ALL student participants. If a BPS chaperone's child who does not attend the participating school must attend the program, the child must be a BPS student and in the same grade or age range as participating students. In this case, the BPS parent

chaperone is responsible for incurring all costs associated with their child's participation.

- All chaperones must complete the Chaperone Agreement form.
- Non-BPS employees who chaperone on a field trip are not covered for liability by the Boston Public Schools.
- Refer to CAO-22 for additional chaperone criteria.

STUDENT ACCESSIBILITY AND PARTICIPATION

- ☐ **Essential Criteria:** The program leader and principal/head of school shall work together to establish essential participation criteria for the trip that informs students and parents of all activities and risks associated with each itinerary activity and trip location, to determine what accommodations or modifications may need to be made for the student to successfully and safely participate in all or portions of the trip.
- ☐ **Recruitment:** Students not enrolled in the Boston Public Schools may not participate. Once on the field trip, student participants are not permitted to leave the group to visit friends, relatives etc., and rejoin the group. Students must remain with the group at all times. Field trips must be advertised to all students (within the whole school, particular grade, class/subject, club, or program associated with the trip), regardless of their financial situation. Schools shall make every reasonable effort to make instructional field trips affordable for all students. A student's ability to pay may not be a criterion for field trip participation. Trips must be advertised to all students (within the school,

particular grade, class, or program associated with the trip), regardless of their financial situation.

- **Accommodations:** Students with English Learner status, 504 plans, and/or IEPs cannot be denied access to field trips due to their status, or ability. It is the responsibility of the school to ensure that all accommodations normally provided to a student as indicated in their educational plans are made available during a field trip, including medication. See Superintendent's Circular SHS-8 for information about medical dispensation on field trips. Participating students' IEP or 504 plan shall be available to any staff coordinating and/or participating in the field trip. If any student has a serious medical, or mental health condition, please be sure that their doctor is aware of the essential participation criteria and location of the trip and writes a letter indicating that the child may safely attend and participate in trip activities. Keep this document on file with other key permissions slips and medical forms.
- **Inclusivity:** Program leaders must consider their student demographics when selecting field trip locations, sites, and activities. Specifically determine the impact the locations, sites, and activities may have on diverse populations such as students of color, EL students, students who identify with the LGBTQ community, students with disabilities, those who may be in the minority during your field trip experience, and those students who belong to groups that have experienced marginalization in the location being visited. Program leaders must (1) work to prepare students for sensitive experiences, and (2) ensure that the program is safe and

inclusive for all students. Consult the Department of Global Education for resources if needed.

- **Inclusive Rooming:** The program leader and principal/head of school shall work with transgender and gender nonconforming students to provide accommodations (including rooming) that affirm the student's gender identity while also ensuring safety. Program leaders should work with students and families to make sure all travel documents (airline tickets, passport) reflect their legal names as listed on government-issued identification, while all unofficial documents and materials may reflect the student's preferred name. [Please view additional rooming guidelines from the Office of Equity here.](#) BPS students and parents are required to sign a BPS Student Traveler & Family Agreement form regarding student conduct while participating in a BPS sponsored field trip. Participation in field trips may be denied to any student who has demonstrated disregard for the policies and rules of BPS or the school prior to the field trip. Parents/guardians and students must be made aware of this policy in advance and communicated with throughout any processes involving their child not participating in a field trip.
- **Student Dismissal:** Following an investigation, if the program leader, in consultation with the principal/head of school and Central Office staff, determines that a student's conduct while on an overnight trip, poses a risk to themselves, or the safety of the group, or is no longer manageable by BPS staff in the field, the district reserves the right to request, and make arrangements for that

student to return home. The district also reserves the right to request that families assume responsibility for all or a portion of the costs associated with their child's return. Students may be subject to further disciplinary action and will be provided the opportunity to have a formal hearing at the school level upon return. The school must document the parent/guardian's consent of this policy prior to the trip.

If a student is to be dismissed from an overnight field trip, the student's parent/guardian must be notified in advance and should agree to meet the student at the airport or other agreed-upon destination. If the parent/guardian is not reachable, the student's principal or appropriate school-based point of contact must be notified and agree to meet the student at the airport or other agreed-upon destination. Students under the age of 16 must be accompanied on their flight by a chaperone. Students over the age of 16 may fly unaccompanied, though a chaperone must accompany the student to the airport to ensure the student checks in for their flight. (Age requirements may be subject to specific airline/train/bus guidelines.) Any costs assumed in this regard will be the responsibility of the parent/guardian.

- **Attendance:** Provisions must be made in advance for any student not attending the trip and staying at school. If applicable, provide alternative arrangements and/or comparable activities for students not attending the trip or unable to participate in a portion of your trip. If a student's family elects for their child not to attend a field trip for any reason, the child may not be penalized through their grade or otherwise. Attendance forms should indicate when a

student is physically absent from the school building on a field trip but participating in a school-sponsored program being conducted off school grounds. (**Note:** It is important to know and document where students are at all times.

PRE-DEPARTURE CONFIRMATION CHECK

Eight Weeks (or More) Prior to Your Trip:

- ☐ **Develop transportation plans:** mode of transportation, travel time, cost, etc. (If applicable, be sure to note how and with whom the child will travel to and from a field trip's departure and pick-up locations.)
- ☐ **Review all students' medical forms** with the school nurse and school counselor to ensure all documents are completed, to support each student's health during the trip. (*Please note:* nurses and counselors do not "clear" students for travel but will provide chaperones with guidance in supporting students while traveling.) Consult with and, when necessary, receive training from and obtain written comments from the school nurse and counselor regarding any students who have expressed medical needs (e.g., medication, asthma, allergies, etc.).
- ☐ If your trip is less than 100 driving miles in distance, please ensure ALL students have valid medical insurance that covers them while on this program. Record details of insurance on the Medical Information Form.

Five Weeks (or More) Prior to the Field Trip:

- ☐ Contact the field trip site and ensure that the necessary arrangements are still in place.
- ☐ Collect the completed and signed Parental Authorization for Overnight Trip, Medical Information, and Medication Administration forms from each participating student and chaperone and ensure that copies of all forms (and the itinerary) are submitted to the principal/head of school.

** Contact the Department of Global Education for the Informed Consent Template to be tailored for your trip and then shared with families.*

- ☐ If necessary, collect the Notarized Parent/Guardian Airline Travel Consent form.
- ☐ Hold a chaperone team meeting to distribute trip responsibilities and to review the student team.
- ☐ Review students' permission slips and medical forms; prepare any questions for follow-up with families and the school nurse.
- ☐ The lead chaperone will record the names of the chaperones and whom each chaperone is supervising; each chaperone must carry this list.
- ☐ Chaperones will organize a buddy system, pairing students with one another for safety purposes.

- ☐ The lead chaperone will prepare trip binder for all chaperones (see *During the Trip* section which lists all binder contents).
- ☐ Notify the appropriate principal leader and the Department of Global Education of your overnight travel plans by scanning and emailing the Overnight Field Trip Request Form at least four weeks in advance.

Two Weeks (or More) Prior to the Field Trip:

- ☐ If applicable, inform the food service manager or attendant of the names of the students going on the trip and the date and time of the field trip.
- ☐ Verify all arrangements, including transportation and reception at the site.
- ☐ Contact parents/guardians via telephone or in-person to review the final details of travel and verify emergency, medical and safety information, and contact details. Be sure families have copies of their child's permission and medical forms as well as the trip itinerary and contact details.
- ☐ Notify/consult with the principal/head of school (and Department of Global Education) if trip plans have changed from the original field trip request.

COMMUNICATION PLAN

- ☐ **For Domestic Overnight Trips:** *The principal/head of school (or designee) is the emergency contact for program leaders and must be notified in the event of a serious medical*

emergency or other emergency event. The Department of Global Education should be used as a resource for questions regarding safety on trips, and for support with insurance support and claims. Prior to departure, program leaders will receive emergency contact information.

- ❑ **Phone Service Coverage:** Program leaders must have cell phone coverage for the duration of the trip for communication with BPS and families in the event of an emergency. This cell phone must be on at all times so you may be contacted in case of an emergency. If this is not possible due to your location, please arrange a communication plan with the Department of Global Education. Program leaders must carry the phone numbers for the principal/head of school or sponsoring district department and the Department of Global Education. You are required to call anytime there is an emergency.
- ❑ **District Communication:** Codify a clear communication plan with your principal/head of school or sponsoring district department prior to departure. You must check-in via phone call, text, or email upon arrival, every 48 hours, whenever the itinerary significantly changes, whenever you expect to lose cell/email coverage, upon departure, and upon safe return. You **MUST** check-in via phone when there is an incident.

Definitions of communication types and expectations:

Green Communication: No immediate concern.

Program leader: notifies principal about arrival, departure, changes in itinerary, loss of connectivity, highlights of programs, photos. **Check in daily via text, phone call, email.*

Yellow Communication: A Yellow Call is a *reportable situation or event, but no threat to life, limb, eyesight, or potential for severe emotional trauma*. The incident is managed effectively in the field by program leader, but could devolve into a serious or critical incident, and requires attention from BPS on-call staff.

Program leader: (1) notifies principal; (2) documents Incident SOAP Report; (3) monitors; (4) updates on-call BPS staff.

Red Communication: Critical, violent, time-sensitive incident, illness, injury; or event that resulted in the loss of OR potential loss of life, limb, eyesight.

Requires IMMEDIATE RESPONSE of program leader:

(1) notifies principal; (2) alerts local medical assistance and/or law enforcement; (3) documents Incident SOAP Report; (4) monitors; (5) updates on-call BPS staff.

- **Communication with Families:** Call students the night before travel to ensure transportation to the departure location is set, remind students to bring travel documents, and answer last-minute student and family questions. Set expectations regarding communication during travel between chaperones/student travelers, and the

principal/families. Families must know who to call 24/7 in case of an emergency.

DURING THE FIELD TRIP PROGRAM

- ☐ On the day of the trip, **take attendance** and leave the current list of students attending the trip with the principal/head of school. If applicable, record a specific bus number and driver's name and leave this information with the principal/head of school and share with all chaperones and, if age-appropriate, students.
- ☐ **Team Safety:** If you believe conditions are unsafe, or unhealthy at any point on the trip, it is the program leader's responsibility to make adjustments in the interest of group/individual safety. Consult your principal/head of school and the Department of Global Education during the trip when you have questions regarding trip safety.
- ☐ **Conduct Safety Reviews with Students in the Field:** The following topics must be reviewed with students:
 - ☐ **Program leaders conduct a fire and safety assessment and fire drill** (Fire Prevention and Safety Instructions) when you arrive at EACH NEW accommodation. Share with the chaperone team the "Assessment" and prepare for orientation and fire drill.
 - ☐ **Share evacuation plan and emergency plans:** Discuss where students go during an emergency or otherwise? Discuss where students go if they are separated from the group during an activity.

- ☐ **Ensure students have a list of the key addresses** (hotel/chaperone information) and emergency information as well as copies of all travel documents. Share where you are staying (room number if applicable) and how to reach you on the trip.
- ☐ **Conduct in-country orientation** for conduct and cultural expectations. Set expectations for phone usage and social media. This is especially critical during an emergency.
- ☐ **Conduct safety orientations** for service learning projects where teams work to construct, alter, and/or repair structures, including painting and decorating, and for agricultural projects, chaperones with the support of program providers, must conduct a safety orientation at the beginning of each activity.

Student Debriefs/Reflections:

- ☐ Conduct morning briefings to review the day's itinerary and key information. Ask and answer questions.
- ☐ Conduct afternoon and/or evening debriefings to review the next day's itinerary, gather feedback, and process the day's learning, and make any necessary adjustments. Engage students in conversations that help them process their experiences. Help them break down stereotypes so that when they return, they have a deeper understanding of the culture and country they visited. Draw connections to how they will take

the experience home with them and how the lessons they have learned will translate back home.

Check-Ins & Student Supervision:

- ☐ Conduct frequent check-ins with the chaperone team to assess programming, student dynamics, and to make any adjustments.
- ☐ Conduct frequent check-Ins with students about their behavioral and physical health as well as their ability to process their trip experiences.
- ☐ Conduct nightly bed checks to be sure students are in their rooms at the designated time. If staying in a hotel/hostel be sure to request in advance for students to be placed near chaperones.
- ☐ Establish a curfew with clear guidelines, and ensure doors are open if students congregate in the evening. Adults should stay close by and conduct frequent expected and unexpected room checks. Be mindful of romantic relationships amongst students.
- ☐ Conduct regular and frequent headcounts and buddy checks throughout the day. *Do not leave students alone.* Students should be accompanied by chaperones unless part of a scheduled activity and age appropriate as approved by their parent/guardian in advance. However, if unaccompanied as part of a scheduled and structured activity, students should be in at least

groups of three AND always know how to reach an adult chaperone.

DOCUMENTS TO TAKE

All chaperones must carry a trip binder at all times (or have them very close at hand) that includes the following documents. The program leader carries the original forms; all other chaperones carry copies.

- Permissions slips (updated based on contact verification done with families)
- Medical Information Form and Medical Administration Form
- Student & Family Conduct Agreement Form
- Parental waivers (if applicable)
- Notarized Airline Consent Form (if applicable)
- Copies of passports, visas, resident cards, and other travel-related documents
- Emergency Action Plan (EAP)
- Insurance information
- BPS Field Guide protocols with emergency phone numbers
- Fire prevention and safety information
- Incident Report (blank and/or completed)
- Witness Report Form (blank and/or completed)
- Incident Investigation Log (blank and/or completed)

- SOAP Note (blank and/or completed)
- List of addresses and emergency contacts in-country for all travelers
- Water Activities Forms if applicable
- Program leaders carry originals of permission slips and medical forms; other chaperones carry copies.

DOCUMENTS TO LEAVE FOR YOUR PRINCIPAL/HEAD OF SCHOOL

- CAO-24 circular with checklists
- Permissions slips (updated based on contact verification done with families)
- Student & Family Conduct Agreement Form
- Parental waivers (if applicable)
- Medical Information Form and Medical Administration Form
- Notarized Airline Consent Form (if applicable)
- Copies of passports, visas, resident cards, and other travel-related documents
- Emergency Action Plan (EAP)
- Insurance information
- Fire prevention and safety information
- International Program Incident Report (blank for reference)
- Water Activities Forms (if applicable)

AFTER THE FIELD TRIP (MANDATORY)

Ensure all students safely return to their parents/families when you arrive back from the destination by following expectations set prior to the trip for student pick-up from arrival location.

- ☐ **Medical Follow-Up:** Depending on travel location and prescribed travel medication, call all students and families after the trip to remind students to continue to take all prescribed travel medication. Additionally, remind students (inform parents/guardians) to see a doctor immediately if they are not feeling well after the trip and to inform the doctor of their recent travels.
- ☐ **Incident Reports:** If applicable, file and follow up with an Incident Report.

AFTER THE FIELD TRIP (SUGGESTED)

- ☐ Write thank-you notes.
- ☐ Present to school, family, and the community about the experience.
- ☐ Conduct related creative and/or analytical projects to showcase student learning.
- ☐ Write a news article about the trip for a local newspaper or website.
- ☐ Email stories, journals, and pictures of your trip to the Department of Global Education.

For more information about this circular, contact:

Owner:	Chief of Teaching and Learning
Department:	Department of Global Education
Mailing Address:	2300 Washington St., Roxbury, MA 02119
Phone:	315-601-0292
Email:	OPL@bostonpublicschools.org

Mary Skipper, Superintendent

ATTACHMENTS:

1. Overnight Field Trip Request Form
2. Emergency Action Plan
3. Parental Authorization for Overnight Field Trip
4. Medical Information Form
5. Medication Administration Form
6. Notarized Parent/Guardian Airline Consent Form
7. Overnight Programs Incident Report
8. Overnight Programs Witness Report
9. Overnight Programs Incident Log
10. Fire Prevention and Safety Instructions
11. BPS Student Traveler & Family Agreement Form
12. BPS Chaperone Agreement Form

OVERNIGHT FIELD TRIP CHECKLIST

Please sign this checklist, retain a copy for your file, and submit the original to the school office for filing.

Your signature indicates that you read and understand the policies in this circular; that they have been/will be followed; and all checklists throughout the trip planning and the trip implementation process have been or will be completed.

School Name: _____

Program Leader: _____ Date _____

Signature of Principal/Head of School or
Sponsoring District Department

Date

CAO- 24 ACKNOWLEDGEMENT FORM

Please sign this checklist, retain a copy for your file, submit the original to the school office for filing and attach it to your completed request package.

Your signature indicates that you read and understand the policies in this circular and that they have been/will be followed and all checklists throughout the trip planning and the trip implementation process have been or will be completed.

School Name: _____

Signature of program leader

Date

Signature of Principal/Head of School
or Sponsoring District Department

Date

OVERNIGHT FIELD TRIP REQUEST FORM

This form is submitted to the principal/head of school and is kept on file in the school office. In addition, notify the appropriate Network Superintendent and the Department of Global Education of your plans (four weeks in advance) by faxing or emailing as a PDF the following documents: 1) Overnight field Trip Request Form signed by the principal/head of school , 2) Day- by-Day trip itinerary, 3) Student roster; D.O.B, grade, emergency contact name, and number and 4) if applicable, your flight or train itinerary. Please call or email to ensure these documents have been received by all parties.

SCHOOL INFORMATION:

School: _____

Date Submitted: _____

TRIP OVERVIEW:

Number of Students: _____ Number of Chaperones: _____

(Supervision: maximum ratio 10:1 with a two-chaperone minimum. For students with disabilities, the ratio of staff to students must be at least the same as the ratio mandated in their IEPs for their classes.)

Field Trip Category: _____

Destination: _____

Dates of Trip: _____

Overview of Trip (Educational Purpose):

ACCOMMODATION/LODGING INFORMATION

Accommodation Name: _____

Address: _____

Phone Number: _____

PROGRAM PROVIDER INFORMATION

(If working with a company, organization, or partner)

Program Provider: _____

Program Provider Contact Person: _____

Program Provider Telephone Number: _____

Program Email: _____

ITINERARY

Please attach the detailed day-by-day itinerary:

Program Leader/Lead Chaperone:_____

Program Leader Phone # (prior to the trip):_____

Program Leader Email: _____

Other Chaperones/Roles in School/ Phone Numbers on Field Trip:
Attach a separate sheet if necessary.

[illegible]

STUDENT PARTICIPANTS:

Please attach a student roster that includes: Legal and last name, D.O.B, grade, emergency contact name, and phone #.

TRANSPORTATION INFORMATION:

Staff are not permitted to drive students. Privately owned vehicles, vehicles from non-approved vendors, or leased vehicles are not to be used to transport students to and from field trips except in the case of a bona fide emergency. Staff who use their own vehicles risk being legally liable. Please refer to TRN-03 for regulations regarding field trip transportation.

Method of Transportation: _____

Transportation Company: _____

(For bus transportation, only BPS-approved vendors may be used regardless of how the trip is paid for. See TRN-3 for list.)

Contact Information (phone and address): _____

Departure Location and Time: _____

Return Location and Time: _____

**If applicable, attach detailed train or flight information.*

FUNDING SOURCES:

Total Cost: \$ _____

Funding Source: _____

Grant Number: _____

BEDF Account Code/Description: _____

Approved by: _____

Principal/Head of School
or Sponsoring District Department

Date: _____

*Your signature indicates that all policies outlined in CAO-22 AND
CAO-24 regarding overnight field trips will be followed.*

EMERGENCY ACTION PLAN (EAP)

PROCEDURES FOR CALLING 911 ON A FIELD TRIP

Do not leave the injured person alone or without an adult present.

1. REMAIN CALM. This helps the operator receive your information.
2. DIAL 911. Remember you may need to access an outside line first.
3. My name is _____. I am a (your role) in the Boston Public Schools.
4. I need paramedics now.
5. My exact address is _____.
6. There is a person with a (state type/location of injury) injury.
7. The person's name is _____ and they are _____ years old.
8. The person is located at _____ which is on the (North/South/East/West) side of the facility.
9. I am calling from (telephone number).
10. (Name) will meet the ambulance.
11. **Don't hang up.** Ask for the information to be repeated back to you and answer any questions the dispatcher may have. Hang up the phone when all information is correct and verified.

12. Wait with the person until EMS arrives.

13. Paramedics will take over care of the person when they arrive. A chaperone must accompany any injured student in the ambulance and remain with the student until the parent/guardian arrives.

14. Call your head of school or appointee. The Department of Global Education can assist in contacting the necessary district personnel and insurance providers. File an Overnight Program Incident Report and Overnight Incident Log.

Principal/Head of School: _____

Phone Numbers: _____

Principal Leader: _____

Department of Safety Services: (617) 635-8000

Department of Global Education: _____

Additional Phone Numbers: _____

PARENTAL AUTHORIZATION FOR DOMESTIC OVERNIGHT FIELD TRIP

ASSUMPTION OF RISK, WAIVER, RELEASE, AND INDEMNITY HOLD HARMLESS AGREEMENT

Program Leaders:

Access the required [Assumption of Risk, Waiver, Release, and Indemnity Hold Harmless Agreement template](#) here. Please make a copy of this template document before you edit the text in **RED**, and then share it with the Director of Global Education. This document is to be reviewed by the Director of Global Education & BPS Legal BEFORE sharing with parents/guardians for signature**

This document is a requirement, and a binding legal document. Should you have any questions, please contact the Department of Global Education.

MEDICAL FORM OVERNIGHT TRIPS

GENERAL INFORMATION

IMPORTANT NOTES:

- Students may be in new and unfamiliar situations when traveling. It is critical that this form is completed thoroughly and accurately so we may be in the best position possible to support you/your child.
- Please indicate with an X _____ HERE if you would like to schedule a meeting with the program leader of the trip to discuss your child's medical or mental health.
- To participate in a domestic overnight trip, a copy of the student's current school year physical examination record must be on file at the school in order to participate on an overnight field trip. If traveling internationally, all students must visit their primary care doctor prior to traveling and be current on all immunizations and vaccinations for the U.S. in addition to the recommended immunizations and vaccinations for the locations/country(s) to be visited.
- To be completed by the parent/guardian of the BPS student.

STUDENT INFORMATION

Student's Full Name:	
Date of Birth:	
Country of Origin:	
Parent/Guardian Name:	Parent/Guardian Name:
Cell:	Cell:
Home:	Home:
Work:	Work:
Email:	Email:
Home Address:	Home Address:

Emergency Contact # 1	Emergency Contact # 2
Name:	Name:
Relationship to student:	Relationship to student:
Address:	Address:
Cell #:	Cell #:
Work #:	Work #:
Email:	Email:

MEDICAL FORM OVERNIGHT TRIPS

STUDENT HEALTH QUESTIONS

IMPORTANT NOTES to be completed by the parent/guardian of the BPS student at least two months in advance of trip:

1. Primary care physician's name and contact information (in case of an emergency):
2. Health insurance provider's name, policy #, and contact information (in case of emergency):
3. Insurance provider claim instructions/procedures (in case of emergency):
4. The student has the following health conditions and/or allergies of which BPS should be aware:
5. Physical health conditions:
6. Behavioral/mental health conditions: (e.g., depression, anxiety, etc.)
7. Allergies (food, medication, insects, plants, animals, etc.):

8. The student takes the following medications (including over-the-counter and herbal) and/or prescriptions of which BPS should be aware. (Be sure to complete the Medical Administration Form):
9. If medication is taken on an as-needed basis, specify the symptoms or conditions when medication is to be taken and the time at which it may be given again.
10. Is there any factor that makes it advisable for your child to follow a limited program of physical activity? (i.e., asthma, recent surgery, heart condition, fear, etc.) If yes, specify the ways in which you wish their program limited. If the student has asthma, please attach the asthma action plan to this medical form.
11. Are there any activities on the itinerary that your child cannot or should not do?
12. Other than a yearly physical, is the student currently under a physician's or other medical professional's care (e.g., social worker, therapist, etc.)? If yes, please detail the reason.

13. Other than a yearly physical, has the student been under a physician's or other medical professional's (e.g., social worker, therapist, etc.) care anytime in the last year. If yes, please detail the reason and dates of treatment.

14. Please list any hospital, treatment center, surgical, psychiatric, or urgent care visits within the last year: (Please specify the date, the reason, the physician or professional seen, and the length of stay.)

15. Additional information of which BPS should be aware concerning student's health:

I authorize the release of the information given above to chaperones and other school staff in order to coordinate services and understand that chaperones will consult with the school nurse about each student's health so they will be in the strongest position to support you/your child on this program.

Student Signature, if at least 18 years of age

Date

Parent/Guardian Signature, if the student
is under 18 years of age

Date

- If necessary, attach the doctor's letter to this form.
- If necessary, attach the asthma action plan to this form.
- If necessary, attach the diabetes action plan to this form.
- If necessary, attach copies that document student shots and immunizations to this form.

MEDICAL FORM: OVERNIGHT TRIPS

MEDICATION ADMINISTRATION

**Please send only essential medications with your student
on this trip.*

Student Name: _____

1. Name of Medication: _____

Time(s) to be taken: _____

Reason for Medication: _____

Side effects to be aware of/other information: _____

2. Name of Medication: _____

Time(s) to be taken: _____

Reason for Medication: _____

Side effects to be aware of/other information: _____

3. Name of Medication: _____

Time(s) to be taken: _____

Reason for Medication: _____

Side effects to be aware of/other information: _____

4. Name of Medication: _____

Time(s) to be taken: _____

Reason for Medication: _____

Side effects to be aware of/other information: _____

Additional information/special instructions:

I authorize my child to take the above medications on this trip.

Student Signature, if at least 18 years of age

Date

Parent/Guardian Signature, if student is
under 18 years of age

Date

TRAVEL CONSENT FORM (PAGE 1)

The parties to this agreement are:

Parent/ Legal Guardian: (hereinafter referred to as “the parent/guardian”)

First and Last Name:

Physical Address:

Contact Details:

Child: (hereinafter referred to as “the child”)

First and Last Name:

Birthdate:

Traveling Guardian(s) and Contact Details: (hereinafter referred to as “The Traveling Guardians”)

Full Name:

Address:

Contact Details:

Notarized Parent/Guardian Airline Travel Consent Form (page 2)

1. I hereby authorize the child to travel with the traveling guardians to the following destination:
2. The period of travel shall be from _____ to _____.
3. Should it prove to be impossible to notify the parent/guardian of any change in travel plans due to an emergency or unforeseen circumstances arising, I authorize the traveling guardian to authorize such travel plans.
4. Should the traveling guardian in their sole discretion (which discretion shall not be unreasonably exercised) deem it advisable to make special travel arrangements for the child to be returned home due to unforeseen circumstances arising, I accept full responsibility for the additional costs which shall be incurred thereby.
5. I indemnify the traveling guardian against any and all claims whatsoever and howsoever arising, save where such claims arise from negligence, gross negligence, or willful intent during the specified period of this travel consent.
6. I declare that I am the legal custodian of the child and that I have the legal authority to grant travel consent to the traveling guardian of the child.
7. Unless inconsistent with the context, words signifying the singular shall include the plural and vice versa.

Notarized Parent/Guardian Airline Travel Consent Form (page 3)

Signed at _____ on the _____ day of _____, 20_____.

Signature _____ (Parent/ Guardian)

Signature _____ (Witness 1)

Signature _____ (Witness 2)

**Witness signatures must be by independent persons and not by anyone listed on the Travel Consent form.*

On this _____ day of _____, 20 _____, before me, the undersigned authority, personally appeared and proved to me through satisfactory evidence of identity, to wit, to be the person(s) whose name(s) is/are signed on the attached document and who signed in my presence.

Official Notary Signature: _____

Name of Notary Typed, Printed or Stamped:

Commission Expires: _____

STUDENT SUPPORT DURING DOMESTIC OVERNIGHT PROGRAMS FORM (RECOMMENDED)

Note: *This form is to be completed by students who intend to participate in an overnight program. The information is confidential and will be used by program leaders to better understand and support the needs of students while on program in a foreign country.*

Student First & Last Name: _____

When preparing for your international program, please think about the following questions, and respond as honestly as possible in order to be supported:

1. What are you nervous about?

2. What are you excited about?

3. What scares you about the trip location or activities (itinerary)?

4. When in a new environment, I get anxious when...

5. When in a new environment, I get upset when...

6. In order to get the most learning and benefits from this experience, I will need...

DOMESTIC OVERNIGHT PROGRAMS INCIDENT REPORT

Incident reports should be used for all yellow and red incidents that are not fully described or investigated already through the SOAP Note.

A. Complete all Fields:

School/s: _____

Date of Report: _____

Country: _____

Incident Date and Time: _____

Reporting Chaperone: _____

B. Complete all Applicable Fields:

Victim(s) Name(s) Contact Information	
Suspect(s) Name(s) Contact Information	
Witness(s) Name(s) Contact Information	
Location of Event Address	

Domestic Overnight Programs Incident Report (page 2)

C. Nature of Incident (check all that apply)

- | | | |
|--|-----------------------------------|------------------------------------|
| <input type="checkbox"/> Injury | <input type="checkbox"/> Sexual | <input type="checkbox"/> Political |
| <input type="checkbox"/> Equipment Fail | Assault | Upheaval |
| <input type="checkbox"/> Behavioral/
Psychological | <input type="checkbox"/> Theft | <input type="checkbox"/> Disease |
| <input type="checkbox"/> Illness | <input type="checkbox"/> Property | Outbreak |
| <input type="checkbox"/> Missing/Separa-
ted Person | Damage | <input type="checkbox"/> BPS Code |
| <input type="checkbox"/> Natural Disaster | <input type="checkbox"/> Sexual | of Conduct |
| <input type="checkbox"/> Physical Assault | Harassment | violation |
| | <input type="checkbox"/> Fatality | <input type="checkbox"/> Other: |
| | <input type="checkbox"/> Crime | |

D. Narrative (Using facts, describe what happened):

Domestic Overnight Programs Incident Report (page 3)

E. Activity at Time of Incident (check all that apply)

- | | | |
|-------------------------------------|--|---|
| <input type="checkbox"/> Class time | <input type="checkbox"/> Fieldtrip | <input type="checkbox"/> Swimming |
| <input type="checkbox"/> Service | <input type="checkbox"/> Camping | <input type="checkbox"/> Water Activity |
| <input type="checkbox"/> Homestay | <input type="checkbox"/> Hike/Jog/Walk | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Traveling | | |

F. Contributing Factors (Check all that apply)

- | | | |
|---|---|---|
| <input type="checkbox"/> Not disclosed in
medical form | <input type="checkbox"/> Alcohol/Drugs/
Medication | <input type="checkbox"/> Orientation/
Training |
| <input type="checkbox"/> Sports/Recreation | <input type="checkbox"/> Motor Vehicle | <input type="checkbox"/> Political/ |
| <input type="checkbox"/> Animal/Insect/Plant | <input type="checkbox"/> Weather/Terrain | <input type="checkbox"/> Cultural/ |
| <input type="checkbox"/> Pre-Existing
Condition | <input type="checkbox"/> Pre-Course Info | <input type="checkbox"/> Language |
| | | <input type="checkbox"/> Other_____ |

Domestic Overnight Programs Incident Report (page 3)

G. Action Taken	Details
<p>First Aid</p> <p>When</p> <p>By Whom</p> <p>Type (i.e., medication, CPR, etc.)</p>	
<p>Emergency Evacuation</p>	
<p>Visit Medical Facility</p> <p>Name of Facility</p> <p>Doctor/PA/Nurse</p> <p>Reported Diagnosis</p> <p>Medication Prescribed</p>	
<p>Emergency Contact Person Notified?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No Name:</p> <p>Date and Time Contacted:</p> <p>Notes:</p>

G. Action Taken	Details
<p>Department of Global Education (DGE) Contacted?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Name:</p> <p>Date and Time DGE Contacted:</p> <p>Notes:</p>
<p>Insurance Contacted?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Name:</p> <p>Date and Time Contacted:</p> <p>Claim #:</p> <p>Notes:</p>
<p>Local Authorities Notified?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Date and Time Notified:</p> <p>Organization:</p> <p>Authority Name(s):</p> <p>Notes:</p>

G. Action Taken	Details
Follow-up Plan	Details:

Signature of Reporting Chaperone:

Date:

File this Overnight Incident Programs Report along with any accompanying reports/documents from local law enforcement, medical professionals, and/or International Programs Witness Report via email if possible OR as soon as circumstances permit. Turn in the original report to the DGE as soon as you return to Boston. Incident reports require at least one witness signature, and where possible the signatures of all impacted participants.

Domestic Overnight Programs Incident Report (page 6)

_____ Witness Signature	_____ Date
----------------------------	---------------

Signatures of those impacted:

1. _____ Date: _____

2. _____ Date: _____

3. _____ Date: _____

4. _____ Date: _____

DOMESTIC OVERNIGHT PROGRAMS WITNESS REPORT

Witnesses shall use this form to provide a statement of their observations to accompany the Incident Report Form.

Witness Statement of [Name]: _____

Phone Number: _____

Address: _____

Description of Incident:

I believe the contents of this statement are true.

Signature: _____ Date: _____

DOMESTIC OVERNIGHT PROGRAMS INVESTIGATION LOG

This template can be used to take running notes during an investigation.

Event	Time	Location	Parties Involved	Source of Information

Event	Time	Location	Parties Involved	Source of Information

Signature of Investigator

Date

SOAP NOTE

SOAP Notes should be used for live documentation of all health related incidents requiring further monitoring and/or evacuation. SOAP Notes should be attached to the corresponding Incident Report.

Subjective: What the patient tells you; note the chief complaint(s):

Objective: What you see; vital signs; general survey of patient:

Assessment: What you think is going on; diagnosis presented by medical professional:

Anticipated Problems:

Plan: What will be done about it; Tests ordered, medications prescribed, follow up needed:

Reporting Chaperone

Date

File this SOAP Note along with any accompanying reports/documents from local law enforcement, medical professionals and/or International Programs Witness Report via email if possible OR as soon as circumstances permit. Turn in the original report to the DGE as soon as you return to Boston.

FIRE PREVENTION AND SAFETY PRACTICES

OVERNIGHT PROGRAMS

Fire safety plans on overnight and international programs differ from the procedures set for our schools. The laws that regulate fire prevention may differ from what exists in Massachusetts. The steps below must be followed on all overnight and international programs:

1. Conduct a fire prevention assessment.

The program leader must conduct a fire safety prevention assessment using the Fire Prevention and Safety Form (Attachment A) within 24 hours of arrival. Using the Fire Prevention and Safety Form, the program leader shall formulate a plan for the evacuation of all persons on the trip in the event of a fire or other emergency. This plan shall include alternate means of egress and should be created in consultation with an accommodation staff person, and if applicable, the third-party provider.

2. Prepare Chaperone Team on fire prevention strategy.

Based on the results from the Fire Prevention and Safety Form, the program leader should ensure that each staff member receives and understands the fire prevention landscape and has instructions on the fire drill procedure created for the accommodation.

Questions to review include:

- a. What are the best means of egress in case of a fire?
(Consider all rooms students and staff are staying in

- and all places where the group may congregate. Use the hotel's posted evacuation routes if applicable.)
- b. Where is the designated meeting point? (This meeting point should be a safe distance from the building, but easy for the group to identify and locate.)
 - c. Who is responsible for each student? (Attendance must be taken; if chaperone ratios permit, the lead chaperone should not be assigned to a group and should serve as the contact person for emergency personnel.)
 - d. What are some hazards that students and chaperones should be aware of?
 - e. What happens in the case of a missing person?
- 3. Review prevention strategy with students and conduct a fire drill.**

The lead chaperone and the chaperone team will review the fire prevention strategy and conduct a fire drill (walkthrough) with the students within the first 24 hours of the trip. Conducting a fire drill (walkthrough) is important as participants are unfamiliar with the building.

Instructions for fire drills:

Since each accommodation is different, each plan and drill will vary. Regardless of the accommodation, it is critical that a procedure is in place for evacuating the building, each chaperone knows their responsibilities, every student participates in the fire drill

(walkthrough), and each person knows the meeting location when evacuated from the building. Please note: A fire drill as defined here is a walkthrough of the route the group will take to exit the premises in the event of an emergency.

A few general instructions:

- Evacuate immediately.
- Do not use elevators during a fire evacuation.
- Each student should walk to the designated meeting location outside of the building in a quiet and orderly manner.
- Make sure all students know all possible exits from their area and that students know where the meeting location is outside of the building.
- Fire drill plans must ensure adequate procedures for the emergency evacuation of students and staff with disabilities. (Have a staging location for students/staff with disabilities and make sure hotel/hostel personnel are also aware.)
- Chaperones are responsible for students under their supervision and must take attendance.

- Upon the evacuation of a building, no person or persons shall re-enter the building without the authorization of the lead chaperone. The lead chaperone, as a part of their fire drill procedures, must establish a command procedure for such evacuations.

4. Conduct a post-fire drill debrief.

After the fire drill, the chaperone team should set aside time to debrief. Record response on Attachment A.

FIRE PREVENTION AND SAFETY ASSESSMENT FORM

For each accommodation, please complete and, upon your return, file this form with other documents you are mandated to keep. Legally, these documents must be kept on file for the current fiscal year plus three additional years after the field trip has occurred.

BUILDING:

Program Leader: _____

Date of the Safety Prevention Assessment: _____

Name/s and Titles of Staff Consulted for Assessment: _____

(accommodation staff/ program provider staff)

OUTSIDE THE BUILDING:

List the possible hazards in the area:

Can the accommodation be accessed by a fire department or emergency team? ☐ YES ☐ NO

INSIDE THE BUILDING

Equipment:

Does the building have fire alarms? ☐ YES ☐ NO

Are there fire sprinklers? ☐ YES ☐ NO

If yes, where are they located?

Is there adequate lighting in the corridors? ☐ YES ☐ NO

Are there clear exit signs? ☐ YES ☐ NO

Are there fire alarm pull stations? ☐ YES ☐ NO

Are the fire alarm pull stations visible and accessible? ☐ YES ☐ NO

Are there fire extinguishers? ☐ YES ☐ NO

If yes, where?

Are there smoke detectors in the corridors and in every room where participants are staying? ☐ YES ☐ NO

Hazards:

List the potential fire hazards at the site:

Are there notable fire hazards such as open fire doors, accumulated trash, blocked corridors, locked exit doors, blocked

stairways, burned-out exit lights, or missing/broken fire equipment?

☐ YES

☐ NO

Means of Evacuation/Egress:

Does the facility have an evacuation plan for each room? (If not, be sure that when you conduct a fire drill (walkthrough) that you develop a plan for leaving the room.)

☐ YES

☐ NO

What are the means of egress?

Are there primary exits and alternate exits?

☐ YES

☐ NO

Note locations:

FIRE DRILL/WALKTHROUGH PLAN:

(Please record notes below.)

POST-DRILL DEBRIEF:

Date and time of the fire drill: _____

Did the students and chaperones follow the procedures of the
fire drill? If no, why not?

☐YES

☐NO

Based on this debrief, either inform the students of your findings for adjustments or, if necessary, conduct another fire drill. Once the safety review and drill are completed, please sign below.

Signature of Program Leader: _____

BPS STUDENT TRAVELER & FAMILY AGREEMENT FOR DOMESTIC OVERNIGHT TRAVEL

Overview: Positive behavior is a key expectation for students participating in domestic and international travel opportunities. Positive behavior reflects trustworthiness, respect, responsibility, ambassadorship, and service. Participants are expected to fully participate, follow all program guidelines, and behave appropriately to ensure a high-quality learning experience.

Parent/guardians: please read this contract carefully with your student and sign it.

Students: your signature on this contract seals your commitment to follow behavior expectations leading up to, and during your school trip.

STUDENTS:

Before I go on the trip:

- I understand that my acceptance to a trip prior to departure does not guarantee that I will be allowed to attend.
- I have access to my school's handbook which includes all BPS and school rules and the BPS Code of Conduct.
- I know that it is my responsibility to follow all BPS rules and guidelines set by the administrator or chaperone.
- I will attend all mandatory pre-departure meetings and complete all mandatory paperwork.
- I will not violate the BPS Code of Conduct.

- I will not distribute or consume alcohol or drugs (including edibles) and/or encourage actions that are against the BPS Code of Conduct or law.
- I will not pack any illegal or inappropriate items (i.e., items in violation of the BPS Code of Conduct, including, but not limited to: weapons, alcohol, edibles, drug paraphernalia).
- I will be compliant with any guidelines set by the school, administrator, or chaperone regarding program expectations and any required materials, such as completed projects, journals, and service hours.
- I know that if I do not act appropriately, or if I violate any rule, there are consequences for my actions. Such consequences include, but are not limited to, not being allowed to participate in the international trip program.

While I am on the trip:

- I will not violate the BPS Code of Conduct.
- I will ask for help from the adults when needed.
- I will treat my peers, all adults, and all people with the utmost level of respect.
- I will not purchase, distribute, or consume any illegal or inappropriate items (i.e., items in violation of BPS Code of Conduct, including but not limited to: weapons, alcohol, edibles, drug paraphernalia), even if these substances are legal in the state or foreign country, or I am of legal age in the foreign country.

- I will use social media responsibly during the trip and will not post or communicate any information regarding other students during an emergency.
- I will abide by the established curfew and sleep alone in my assigned bed and sleeping location each night.
- I will not vandalize any property at any venue I visit (hotel, tour bus, tourist sites, homestay location).
- I will obey the BPS dress code, as well as the suggested attire for the foreign country and specific sites and locations within the foreign country I will visit.
- I will not share any medication with anyone on the trip.
- I will take medication prescribed for me by my doctor for required or recommended medical use while abroad (e.g., malaria pills, asthma inhaler, prescriptions for anxiety, depression).
- I will not leave the group at any time unless specifically authorized to do so.
- I will practice good common sense, respect, and consideration for others and their property.
- I understand that I am responsible for keeping my passport, important belongings, and other travel documents safe.
- I understand that partaking in any illegal activity abroad can result in my arrest.
- I understand that if an issue of any kind arises, my chaperone will address the issue, and their decision is final.

- I know that if I do not act appropriately, or if I violate any rule, that there are consequences for my actions. Such consequences include, but are not limited to, being sent home at my parent/guardian's expense.

PARENT/GUARDIANS/ STUDENTS AGE 18 OR OLDER:

I fully understand the following conditions regarding student international travel with BPS:

1. The BPS Code of Conduct applies to all field trips. Following an investigation, if the program leader, in consultation with the principal/head of school and Central Office staff, determines that a student's conduct while on an overnight trip poses a risk to themselves, or the safety of the group, or is no longer manageable by BPS staff in the field, the district reserves the right to request and arrange for that student to return home. The district also reserves the right to request that families assume responsibility for all or a portion of the costs associated with their child's return. Students may be subject to further disciplinary action and will be provided the opportunity to have a formal hearing at the school level upon return.
2. If a student is to be dismissed from an overnight field trip due to behavior that violates the BPS Code of Conduct while participating in a domestic overnight trip, the student's parent/guardian must be notified in advance and should agree to meet the student at the airport or other agreed-upon destination. If the parent/guardian is not reachable, the student's principal or appropriate school-based point of contact must be notified and agree to meet the student at the airport or other agreed-upon destination. Students under the age of 16 must be accompanied on their flight by

a chaperone. Students over the age of 16 may fly unaccompanied, though a chaperone must accompany the student to the airport to ensure the student checks in for their flight. (Age requirements may be subject to specific airline/train/bus guidelines). Any costs assumed in this regard will be the responsibility of the parent/guardian.

3. Parents or students who sign contracts and/or agreements with third-party company vendors acknowledge that outside companies' protocols and procedures might differ from BPS policies and procedures. Families should especially be aware of cancellation and refund policies. BPS is not responsible for money paid to third-party vendors.
4. BPS reserves the right to cancel a trip at any time. Trip destinations that impose an immediate risk to our students will be canceled. In these instances, all families will be notified immediately.

(Families: Keep this page.)

(Program leaders: Keep this page.)

STUDENT/GUARDIAN STATEMENT OF UNDERSTANDING

We have read and understand the BPS Student Traveler & Family Agreement Form. We understand what is expected of the prospective student traveler and feel that we, the parent/guardian and student, can commit to these expectations.

PARENT/GUARDIAN (print name): _____

PARENT/GUARDIAN (signature) _____

DATE _____

PHONE NUMBER: _____

STUDENT (print name): _____

STUDENT (signature): _____

DATE: _____

PHONE NUMBER: _____

(Students: Return this page to your program leader.)

BPS CHAPERONE AGREEMENT FORM

This form is to be completed by all chaperones of BPS sponsored field trips and submitted to the program leader (lead chaperone).

School Name: _____

Destination: _____

Departure Date: _____ Return Date: _____

All chaperones must agree to abide by the following code of conduct in order to participate in a BPS-sponsored field trip.

SAFETY & RESPONSIBILITY

I understand that my safety and the safety of other participants are extremely important during this field trip, and I agree to make safety my first priority. I agree to conduct myself in a manner that promotes my safety and the safety of others at all times. I understand that maintaining students' safety requires that students must be supervised by me and/or other chaperones at all times while students are engaged in field trip activities. For overnight and international field trips, I understand that nighttime curfews and room checks for students, as well as morning wake-up calls for students, are part of my responsibility. I agree to follow BPS policies, protocols, and guidance of BPS staff when in the field.

DRUG & ALCOHOL POLICY

I understand that the BPS Code of Conduct prohibits students from possessing, using, selling, and/or distributing any of the following on all domestic and international field trips:

Alcohol; marijuana, non-prescribed controlled substances, imitation controlled substances, inhalants, other intoxicants, controlled or drug paraphernalia; unauthorized possession, use, or distribution of over-the-counter medication, and selling of prescription drugs. The Code also prohibits the use of tobacco products (including e-cigarettes, hookah paraphernalia, and vapor cigarettes). I understand that these prohibitions apply to all students, regardless of age.

I understand that I am forbidden to use or visibly be in possession of tobacco in the presence of students. I also understand that the use of all other drugs, including alcohol, and weapons are strictly prohibited on the field trip.

Chaperone Name (Printed): _____

Chaperone Name (Signature): _____

Date: _____