CCSD
CLARK COUNTY
SCHOOL DISTRICT

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	
Principal/Director		Cell Phone			
Teacher/Sponsor		Cell Phone			
Educational Value/ Nevada Standards Supported					

Student Group		Anticipated Number of Participants	_____ Students _____ Adults
Primary Destination			
Address			
Travel Dates		Duration	_____ Total Days _____ School Days

APPROVAL REQUIREMENTS ACKNOWLEDGEMENT – This section is required for all student travel. **INITIAL**

☐ I acknowledge that no agreements have been made, funds spent, nor parent/guardian or student communication been shared regarding this travel.

Destination Type/Duration					
☐ District school or other District location same day *Requires preliminary **Principal** approval*	☐ Non-District in-state same day *Requires preliminary **Principal** approval*	☐ Non-District in-state overnight *Requires preliminary **Principal and Region or Principal Supervisor** approval*	☐ Out-of-state same day *Requires preliminary **Principal and Region or Principal Supervisor** approval*	☐ Out-of-state overnight *Requires preliminary **Principal and Region or Principal Supervisor** approval*	☐ International overnight *Requires preliminary **Principal, Region or Principal Supervisor, Deputy Superintendent, and Superintendent** approval*

_____ Teacher/ Sponsor _____ Principal

SOURCE OF FUNDS – This section is required for all student travel. Per District Regulation 3312, Purchasing Authorization and Nepotism—All Funds, if expenditures to a single service/vendor will exceed $100,000.00, approval must be granted by the Board of School Trustees. **INITIAL**

Student travel is funded by: ☐ School Budget ☐Student Generated Funds ☐Student/Family ☐ Fundraising ☐ Grant ☐ Donation ☐ Other_____
Entry Fee: $_____ ☐ Per person ☐Group Anticipated total cost: $_____ *Board Approval Required: ☐ Yes ☐No
Deposit Required: ☐No ☐ Yes, for_____ in the amount of $_____ Deposit Refundable: ☐No ☐ Yes, $_____

TRANSPORTATION AND LODGING – This section is required for all student travel.

Planned Method of Transportation		Planned Lodging Location with address
☐ District School Bus	☐ Airplane	
☐ Approved District Charter Bus	☐ Other: _____	
☐ Rental Vehicle *(Maximum 3 vehicles)*		

_____ Teacher/ Sponsor _____ Principal

ITINERARY AND LIABILITY PLAN – This section is required for student travel to **all non-District destinations**. **INITIAL**

☐ I understand that the Risk Management Department recommends reviewing the activities listed on the itinerary closely to avoid participation in uninsurable activities.
☐ Detailed (anticipated) itinerary is **attached**, which includes all planned activities.
☐ Travel advisory (international travel only) for destination country has been obtained from travel.state.gov and is **attached**.

Anticipated Highest Hazard Class Planned Activity			
☐ Hazard Class 1	☐ Hazard Class 2	☐ Hazard Class 3	Hazard Class 4 *Prohibited*

_____ Teacher/ Sponsor _____ Principal

PRELIMINARY APPROVAL TO EXECUTE AGREEMENTS, UTILIZE FUNDS, AND COMMUNICATE WITH PARENTS/GUARDIANS AND STUDENTS – This section is required for all student travel.

Principal/Director	Date	Region or Principal Supervisor	Date	Deputy Superintendent	Date	Superintendent	Date
Required for all student travel.		*Required for overnight, hazard class 2+, out-of-state, international.*		*Required for international travel.*		*Required for international travel.*	

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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/guardians and students, and execution of funds for student travel may take place only after preliminary approval.

CHAPERONE ACKNOWLEDGEMENT – This section is required for all student travel. | **INITIAL**

☐ I understand that the following chaperone requirements may apply:

	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

_____ Teacher/ Sponsor _____ Principal

☐ Chaperone-to-student **meets requirements**.

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 STUDENT TRAVEL ACKNOWLEDGEMENTS – This section is required for all student travel. | **INITIAL**

I acknowledge that:

☐ Final list of student participants with student numbers is **attached**. Confirmed number of students: _____

☐ The administrator/designee attending is:_____. Cell phone number: _____

☐ Final list of all chaperones is **attached,** including the administrator/designee, with contact information/cell phone numbers.

☐ For each student, a CCF-796 Field Trip Permit and CCF-455 Medical Authorization are **attached**.

☐ For each District employee acting as a chaperone, an absence request has been **submitted** and **approved**.

☐ For each non-District employee acting as a chaperone, a copy of the District volunteer badge is **attached.**

☐ Transportation and lodging arrangement records are **attached** in alignment with the plan above.

☐ Final, detailed itinerary is **attached**.

☐ If categorized as Hazard Class 3, the approved insurance contract is **attached**.

☐ All school-executed reservations/contracts/agreements related to this activity have been reviewed by the Office of the General Counsel and the Risk Management Department (as appropriate) and are **attached**.

☐ Arrangements have been **made** with Food Services/school kitchen manager.

☐ Arrangements have been **made** with the school nurse involving student health needs, student medications, and first aid kit.

☐ Documents provided to parents/guardians (itinerary, etc.) and a plan for communication with parents/guardians during travel is **attached**.

_____ Teacher/ Sponsor _____ Principal

FINAL INTERNATIONAL STUDENT TRAVEL CHECKLIST – This section is required for all international student travel. | **INITIAL**

☐ For each student, a CCF-799 International Field Trip Permission Form is **attached**.

☐ 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).

☐ Current travel advisory for destination country has been obtained from travel.state.gov and is **attached**.

_____ Teacher/ Sponsor _____ Principal

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

_____ _____
Principal Date
Required for all student travel.

_____ _____
Region or Principal Supervisor Date
Required for overnight, hazard class 2+, out-of-state, international.

_____ _____
Deputy Superintendent Date
Required for international travel.

_____ _____
Superintendent Date
Required for international travel.

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 if expenditures to one service/vendor will exceed $100,000.00 and will require Board of School Trustee approval. If so, work with your Region or principal supervisor to submit the required paperwork. See District Regulation 3312, Purchasing Authorization and Nepotism—All Funds.
- Determine hazard class and level of approval required.
- 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 services/vendors, communication with parents/guardian and students, transportation secured, and execution of funds for student travel may only take place after the preliminary approval.
- Per District Regulation 3312, Purchasing Authorization and Nepotism—All Funds, if expenditures to a single service/vendor will exceed $50,000.00, approval must be granted by the Board of School Trustees.
- 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 for Approval of Student Travel

Destination Type/Duration	Approval Required	Timeline
District Location, Same Day	Principal	30 Days Recommended
Non-District, In State, Same day	Principal	30 Days Recommended
Non-District, In State, Overnight	Principal and Region or Principal Supervisor	60 Days Required
Out of State, Same Day	Principal and Region or Principal Supervisor	60 Days Required
Out of State, Overnight	Principal and Region or Principal Supervisor	60 Days Required
Expenditure Requiring Board of School Trustees approval	Board of School Trustees	90 Days Required
International, Overnight–Preliminary Approval	Principal, Region or Principal Supervisor, Deputy Superintendent, Superintendent	6 Months Required
International, Overnight–Final Approval	Principal, Region or Principal Supervisor, Deputy Superintendent, Superintendent	90 Days Required