

FIELD TRIP CONSENT – NORMAL (N) SAFETY LEVEL

Form 6031-04

For safety-sensitive issues, form 6031-05 must be used instead.

_____ School _____ Date

Supervising adult(s)

Class(es)

Departure _____ time _____ Return _____ time _____
month/day/year month/day/year

Destination and nature of activity _____

Transportation *(Please be aware that private vehicles and rental vans may not meet the same safety standards as school buses.)*

- | | |
|--|---|
| <input type="checkbox"/> Private vehicle | <input type="checkbox"/> School bus |
| ___ Student driver | <input type="checkbox"/> Other (please specify) |
| ___ Adult driver | |

If during instructional hours, alternate activity provided for non-participating students _____

Other information from school _____

CONSENT

_____ Student's Name (Please PRINT)

YES

- I have been provided with information about the planned field trip (including possible information such as educational objectives, field trip agenda, itinerary, level of supervision, safety concerns, cost, fundraising, mode of transportation – bus, private vehicles, vehicles driven by students, etc.
- I feel that I have received sufficient information from the school and hereby consent to my child taking part in this activity.
- The **medical care card number** for the above mentioned student is: _____

_____ Signature of parent/guardian

_____ Date

Optional:

- YES** **NO** The above-named student will carry a piece of personal identification on this field trip.

OR

NO

I do not give my consent for the following reason(s):

_____ Signature of parent/guardian

_____ Date