APPLICATION FOR SPONSORING AN INTERNATIONAL FIELD TRIP

Application Due Date: ___________  (90 days before trip)  
Medical Release Due Date: ___________  (2 weeks before trip) 

Board Approval Needed by: ___________  (60 days before trip) 

Field Trip Director (please print): ________________________________

Trip Director agrees to follow all procedures, including meeting deadlines:

______________________________________________________________
SIGNATURE                                      DATE

Date Application Submitted: ______________

Destination: _____________________________________________

Department/School Sponsor: ________________________________
DEPARTMENT  SCHOOL

Departure Date: ______________  Return Date: ______________

Number of student participants:  MALE: __________  FEMALE: __________

Supervision:
(minimum of two chaperones)

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<th>Staff Names/gender/cell #</th>
<th>Parent/Guardian Names/gender/cell #</th>
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Curricular basis for this trip (refer to 4531-P):

Itinerary (if available, please attach)

Financial Arrangements
Please indicate steps taken to ensure this trip is affordable to a diversity of students.

Student Assessment (cost per student): $__________/per student

Activities Funds (include account number): $___________ Account Number: ______________

School Budget (include account number): $___________ Account Number: ______________

Other: ____________________________________________________________

Emergency Information
Government website to be checked for travel advisories three times: (1) Prior to application (2) Within one week of departure date (3) Within one day of departure date: http://travel.state.gov

Date of first travel advisory review: ______________

Findings: ___________________________________________________________

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Emergency medical kit to be picked up within one (1) week of departure date and returned to the Board Building or medical office location within one (1) week of return (trip director must carry a phone with international call capabilities; district will reimburse for cost of coverage, used only for requisite check-in and emergencies.)

Kit will be picked up from: ____________________________

Emergency Contact Information
(Print name, cell phone number, other number on location such as tour company or host company)

Designated Administrator:
(In Ithaca during trip)  NAME  CELL  HOME

Trip Director:  
NAME  CELL  HOME

Required Signatures, with dates signed

Department Leader:  ____________________________  SIGNATURE  DATE

Activities Director (clubs only):  ____________________________  SIGNATURE  DATE

Principal or Designee:  ____________________________  SIGNATURE  DATE

Superintendent or Designee:  ____________________________  SIGNATURE  DATE

DATE RECEIVED: ____________________________

References: 4531 International Field Trips Policy, 4531-P International Field Trip Procedures, 4531-F2 International Field Trip Student Conduct Contract (Form), 4531-F3 Parent/Guardian International Trip Permission Slip (Form)
International Travel Student Conduct Contract

I hereby agree that during the travel to ____________________, I will abide by and be subject to all the rules of the Ithaca City School District Code of Conduct, including but not limited to, the prohibition against the use of alcoholic beverages, illegal drugs, controlled substances and/or smoking no matter the legal age in the country of destination. I understand that students who violate the Rules of the Code of Conduct will be subject to disciplinary action.

While traveling, I will follow all instructions and abide by all curfews and rules set by chaperones. Students who fail to abide by these instructions may be sent home at their parents’ expense.

I understand that I am required to respect the property of others while on the trip, including, but not limited to, the airplanes, buses, hotel rooms and/or places visited. Students who vandalize property will be required to pay the cost of repair and face school disciplinary action.

I hereby consent to a search of my belongings and hand luggage by school staff or chaperones before the trip departure. In addition, I recognize that staff and/or chaperones may conduct searches of my hotel rooms, personal property, purses, briefcases, backpacks, and bags if reasonable suspicion exists that I am violating school rules or the law. These searches may occur at any time during the trip, including in hotel rooms and before boarding buses. I promise to report to the chaperones any information which may jeopardize the safety and/or success of the trip.

I HEREBY UNDERSTAND MY RESPONSIBILITIES ON THIS OVERNIGHT TRIP TO ____________________ ON ____________________ AND THE CONSEQUENCES WHICH MAY RESULT IF I DO NOT FOLLOW THE PROVISIONS OF THIS STUDENT CONDUCT CONTRACT.

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<th>Print Student Name</th>
<th>Student Signature</th>
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<th>HS Principal’s Signature</th>
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Parent/Guardian Completes:

I have read this Student Conduct Contract, understand it, and have discussed it with my student whose signature appears above. I give permission for my child to participate in the school sponsored international travel to ____________________________
on the following date(s): ______________________________.

I further understand that all luggage and personal belongings may be checked by chaperones and that the bus will leave from ____________________________
at _________________AM ____ PM ____

and return to ________________________________
at _________________AM ____ PM ____

Parent/Guardian Signature ____________________________ Date ____________________________

References: 4531 International Field Trips Policy, 4531-P International Field Trip Procedures, 4531-F1 International Field Trip Application (Form), 4531-F3 Parent/Guardian International Trip Permission Slip (Form)
International Trip Permission Slip

_____________, 20___

Dear Parents:

We believe that it is an important part of our mission and of our students' education that we should continue to maintain travel opportunities, in this case, to ________________ in ________________ of 20_____. We believe that this is a wonderful opportunity for our students, but at the same time, we must remind our families that no location is safe from risks.

As we prepare for this year's field trip, I need to point out that teachers and other trip chaperones can supervise students, but cannot always protect them. The Ithaca City School District will consider canceling trips if advised to do so by the United States Department of State, or if other safety or health considerations suggest that it would be imprudent to continue the trip as planned. If we do cancel a trip for any of the above reasons, we cannot reimburse any trip deposits or other expenses.

We believe that the trip to ________________ will be safe and well-supervised. With that said, however, each family must make its own assessment as to its level of comfort with travel. Students cannot be watched every minute of every hour, and external conditions cannot be controlled. Students traveling abroad must exercise a high degree of independence and good judgment.

The ultimate decision whether it is safe for your child/children to travel is one which you should make as a parent. Please speak to your student clearly and directly about the importance of good behavior, following rules, and staying with the group during the trip. Our chaperones will do their best to keep the group together and safe should any untoward or dangerous situation arise, but they will need our students' help. Please make sure that your child will know how to contact you while out of the country.

Please sign and return a copy of this letter to indicate that you have read it and that you agree to the further statements below.

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International Trip Permission Slip (con’t.)

I/we have read the above letter. I/we understand that there is risk inherent in all travel, and that both world
events and local conditions may create situations which the School and trip chaperones can neither
anticipate nor control. I agree that the Ithaca City School District has the discretion to cancel the trip to
____________________ as it deems necessary based upon its assessment of safety and health concerns.

I agree that if the trip is cancelled by the ICSD for any reason not covered under a travel organization’s
insurance policy, I will not hold the ICSD, the ICSD Board of Education, or any of their respective officers,
agents or employees responsible for any unfunded costs incurred by me or my student.

I understand that, if my student violates the School District’s Code of Conduct at any time prior to departure,
he/she may forfeit his/her right to participate in the trip to ____________________. In such event, I agree
that the School District will not be responsible for the cancellation fees stated in the contracted travel
organization's policy. I further understand that, if my student violates the School District’s Code of Conduct
during the trip, the School District reserves the right to send the student home accompanied by a chaperone
at the parent’s expense.

I/we understand that students may not be directly supervised at all times, and that my student’s safety and
well-being is a matter for which the student will be largely responsible. I/we accept these risks and
responsibilities.

I/we believe that my student is of sufficient maturity to behave in an appropriate manner on the trip. I/we
have spoken to my student about the importance of mature behavior, the importance of following
instructions, and the importance of behaving sensibly.

Dated: ________________

__________________________  __________________________
Signature of Parent or Guardian                              Printed Name

__________________________  __________________________
Signature of Parent or Guardian                              Printed Name

Please sign and return one copy of this letter, and keep another copy for your own records.

References: 4531 International Field Trips Policy, 4531-P International Field Trip Procedures, 4531-F1 International
Field Trip Application (Form), 4531-F2 International Field Trip Student Conduct Contract (Form)