

Student ID# _____

**PLEASANTON UNIFIED SCHOOL DISTRICT
 STUDENT FIELD TRIP AUTHORIZATION**

This form must be on file in the attendance office 24 hours prior to the trip. In no case will the student be permitted on the field trip if the form is not on file with the parent/guardian(s) signature.

Student's Name: _____ Grade: _____

Destination and Purpose: _____

Date of Trip: _____ Departure Time: _____ Return Time: _____

Method of Transportation: _____ Staff Sponsor: _____

Name of Medical Insurance Company: _____

Group/Coverage Number: _____

Period of Absence: Sponsoring staff member must draw lines through periods **below** not included.

Grade Level K-5	K	1	2	3	4	5		
Grade Level 6 – 12 (Period)	1	2	3	4	5	6	7	8
Teacher's Approval/Initials								

PARENT APPROVAL

Your attention is directed to Education Code Section 35330. This law states, in part, "all persons making field trips ...shall be deemed to have waived **all** claims against the District or the State of California for injury, accident, illness or death occurring during or by reason of the field trip."

Further, the parent/guardian(s), by acknowledging this field trip authorization, fully understands and recognizes that the student's participation in this field trip is **strictly voluntary, not** required attendance.

Field Trip Regulations:

1. Students shall obey all transportation rules while on the trip including returning to school by the same form of transportation as departure, unless prior written permission is granted by site administrator to return with parent/guardian.
2. Students shall comply with all applicable school bus, school and field trip rules and shall be subject to discipline up to and including suspension or expulsion for their actions on a field trip.
3. Students may be denied future field trips and be sent home, at the parent/guardian(s) expense, if field trip rules are not observed.
4. Sponsors and adult chaperones will discuss field trip rules and safety with students prior to the field trip.
5. Sponsors will be responsible for obtaining all field trip authorization forms, as well as transporting this information on the field trip.

I certify that all Emergency Medical Information on file with the District is current as of the date of this trip. (Come to the school office if this information needs updating.)

 Parent/Guardian Signature

 Date