

FIELD TRIP REQUEST FORM

To be completed by the coordinator/teacher: Lorraine Martin

Regular/Local Field Trip: Chaperone Ratio (10:1) or Water/Overnight/Out-of-country: Chaperone Ratio (7:1)

School: North Star Academy Field Trip Activity: 7th grade Pinnacles Trip

Location: Pinnacles National Park Date(s) of Field Trip: May 19, 2026 - May 22, 2026
5000 East Entrance Rd Pinnacles, CA 95043

Educational Purpose: 7th grade NGSS Earth Science, Life Science, Environmental Sciences; CORE social studies

Number of Students: 86

Number of Adults: 13 3 teachers
10 volunteers

Method of Transportation: BUS

**Nursing needed for one or more students (Diastat, Insulin, Feeding Tube or other condition etc.):
 Yes No

**Special Services needed for one or more students (Deaf/Hard of Hearing/Visually Impaired, Wheelchair etc.):
 Yes No

***If yes, the site admin is to contact the Director of Health and Wellness and/or the Director of Special Education at least 4 weeks prior to a field trip to coordinate services.*

If transportation is to be provided by private vehicles, the following information has been checked and obtained:

- Driver Form signed by each private car driver certifying the following:
- Driver is over 25 years of age and possesses a valid California driver's license.
 - Vehicle to be used is insured for at least the minimum required by the state of California.
 - Vehicle has the proper number of safety belts as required by state law.
 - The vehicle's rear-view mirrors, brake lights, directional signals, tires, and windshield wipers are in good operating condition and there is no vision impairment in the vehicle.
 - Booster Seat for children who are under 8 and 80 pounds, per California law
 - Vehicle has a first aid kit.

To be completed by Site Administration or Management:
____ Volunteers have been fingerprinted through H.R. at least two weeks prior
____ Megan's Law website checked for all chaperones
____ **Contact Director of Health and Wellness and/or Director of Special Education at least 4 weeks prior to a field trip to coordinate services. Please make a copy of this form and give it to your School Nurse or the Special Ed Department to assist with services.

Principal's Signature: [Signature]

Date: 2.3.26