

**RUSH-HENRIETTA  
CENTRAL SCHOOL DISTRICT**

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# EXHIBIT

# 4531.5-E.1

**COACH REQUEST FOR ATHLETIC FIELD TRIP OR STUDENT TRAVEL –  
OVERNIGHT OR INTERNATIONAL**

Rush-Henrietta coaches who plan to take students on an overnight athletic field trip or international excursion as a school-related activity must abide by District Policies 4531.5 and 4351 and their supporting exhibits.

**Requests for athletic field trips that extend overnight must be submitted at least 3 months before the planned trip.**

**Requests for international athletic field trips (other than to Ontario or Quebec) must be submitted at least 6 months before the planned trip.**

**NOTE: The above timeframes are not applicable to Section Five or New York State sanctioned post-season play.**

**1** { **Name** (Please Print) of person making this request: \_\_\_\_\_  
**Signature** of person making this request: \_\_\_\_\_  
**Date of request:** \_\_\_\_\_

**2** { **Planned destination:** \_\_\_\_\_  
Briefly describe the planned excursion and its athletic purpose \_\_\_\_\_  
\_\_\_\_\_

**3** { **Departure** -- Day/Date/Time: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ a.m./p.m.  
**Expected Return** -- Day/Date/Time: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ a.m./p.m.

{ **Number of students**\_\_\_\_\_. Attach a complete list of students' names with this request.

4

Do any of these students have health needs that might require special health care precautions?  YES  NO If yes, how will the child's special needs be met?

\_\_\_\_\_  
\_\_\_\_\_

5

**Number of adults accompanying students** \_\_\_\_\_.  
Please list their names and relationship to the school district or to the students.  
(e.g. parent, teacher, youth assistant, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6

**How will the students be transported?** (check one)

District Buses or vans

Commercial Carrier Explain: \_\_\_\_\_

7

**Provide the specific costs/student (if any) of this trip.**

Total Costs per Student: \_\_\_\_\_

Itemize these costs:

Lodging \_\_\_\_\_

Travel \_\_\_\_\_

Food \_\_\_\_\_

Registration or admission \_\_\_\_\_

Other costs \_\_\_\_\_

a. How will these expenses be met?

\_\_\_\_\_  
\_\_\_\_\_

b. What additional expenses will be incurred if this trip is taken? Be complete. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

8

Attach a day-by-day trip itinerary.

9

Date of parent/student informational meeting. \_\_\_\_\_

\_\_\_\_\_

10

Coaches need to observe the guidelines provided in 4531.R-2 and 4531-E.7

**APPROVAL PROCESS** (Must be completed by supervisors concerned):

**After completing all of the above information, please submit to Athletic Director.**

**Athletic Director:** \_\_\_\_\_ Date \_\_\_\_\_  
(Stops here if for Section Five or New York State sanctioned post-season play)

**ASI:** Approve ( ) Disapprove ( ) \_\_\_\_\_ Date: \_\_\_\_\_ [Send to BOE]

**Board Review:** Approve ( ) Disapprove ( ) \_\_\_\_\_ Date: \_\_\_\_\_ (Send to list below)  
*District Policy requires Board of Education approval for all international field trips. All field trips lasting more than 24 hours or requiring an overnight stay that are not scheduled during the school recess also require Board approval.*

***TRANSPORTATION DEPARTMENT USE ONLY***

Number of Buses \_\_\_\_\_

Approximate total miles of trip \_\_\_\_\_

Approximate number of hours used \_\_\_\_\_

Balance of hours remaining \_\_\_\_\_

Approved \_\_\_\_\_  
Director of Transportation

- ✓ Signed original (this page) – Transportation (if applicable)
- ✓ Copy of original plus student list – Athletic Director
- ✓ Copy of original plus student list – Coach
- ✓ Copy of original plus student list – Principal[s]

Adoption date: September 9, 2008