



DAY OF SERVICE FIELD TRIP FOR GARFIELD SENIORS

Dear Garfield High School Community,

Wednesday, October 16th is the school day PSAT for 9th-11th graders. During this time, there will be no classes and seniors will be encouraged to participate in a Day of Service at Washington Middle School. Garfield students will choose to complete a mentorship program or beautification project to build community with our fellow feeder school.

Participating seniors will receive twenty (20) service-learning hours which will be included in the 60 hours of service-learning required for graduation.

Please complete the district field trip permission slip and return to the counseling office by Friday, October 11th and consult the schedule below:

Day of Service at WMS Schedule:

- 8:45-** Garfield seniors report to the Auditorium to take attendance
- 8:55-** Depart Garfield and walk to Washington Middle School (2101 S. Jackson St, Seattle, WA 98144)
- 9:10-** Arrive at Washington Middle School
- 9:20-** Start the Day of Service program
- 11:55-** Lunch (will be provided by GHS)
- 2:00-** Walk back to Garfield
- 2:20-** Early Dismissal

Day of Service Options (Please Check One):

- ☐ **Lab Assistants:** Seniors work with lab-based sciences and mentor students to complete experiments
- ☐ **Music Mentors:** Seniors help participate in band, orchestra or vocal instruction program
- ☐ **Language Learners:** Seniors aid teachers with a Spanish lesson & group work
- ☐ **TA for the Day:** Interested in becoming an educator? Help teachers execute an exciting lesson plan
- ☐ **PE Peers:** Seniors help lead a gym game or challenge for the phys. ed program
- ☐ **Assistant Art Instructors:** Seniors facilitate a small-group art project
- ☐ **Eco Education:** Seniors complete a sustainable garden beautification project

Student Name: _____

RETURN TO COUNSELING OFFICE
BY

FRIDAY OCTOBER 11

Seattle Public Schools

Parent/Guardian Authorization for Day Field Trip

Directions:
SPS Staff:

- 1) Use one form per trip.
- 2) Complete the School Portion of form on page 1
- 3) Duplicate one form per student
- 4) Send a copy home for parent and student signatures
- 5) During the field trip the signed original form must be carried by the lead chaperone and a photocopy must be left on file in the school office

Students: 1) Complete the "Student Agreement" on page 1

Parent / legal guardian, if student is under 18 years of age, or student, if at least 18 years old:

- 1) Complete the "Authorization & Acknowledgement of Risks" section on page 2
- 2) Complete the "Medical Authorization" section on page 2

School Name: GARFIELD HIGH SCHOOL **Student Name:** _____

Date(s) of Trip: WEDNESDAY, OCTOBER 10TH **Destination:** WASHINGTON MIDDLE SCHOOL

Purpose(s): SERVICE LEARNING FIELD TRIP

List of Activities: Mentorship to WASHINGTON MIDDLE SCHOOL STUDENT

Supervision: (Check One)

☒ Students will be directly supervised by adult chaperones on this trip at all times.

☐ Students will be directly supervised by adult chaperones on this trip with the following exceptions: _____

Mode of Transportation: (Check all that apply.)

☒ walking ☐ school bus ☐ public transit ☐ Other _____

Students will leave from: GARFIELD HIGH SCHOOL at 8:45 am

(where) (time)

Students will return to: GARFIELD HIGH SCHOOL at about 2:20 pm

(where) (time)

Chaperone(s) in Charge: TIFFANY LYNN BIGHAM

Chaperone/Student Ratio: 1:15 (max. ratio for K-5: 10:1; max. ratio for Grades 5+ 15:1)

STUDENT AGREEMENT

While participating in this field trip, I understand I will be a representative of SPS and my school community. I understand that appropriate standards must be observed, and I will accept responsibility for maintaining good conduct and abide by school based rules and the *Basic Rules of Seattle Public Schools - Code of Prohibited Conduct*

Student Signature _____

Date _____

TO BE COMPLETED BY THE SCHOOL

BY THE STUDENT

Important Medical Information Form

Student Name:

Date of Birth:

Parent/ Guardian Name(s):

Telephone: (Cell) _____ (Home) _____ (Work) _____

Telephone: (Cell) _____ (Home) _____ (Work) _____

Emergency Contact Information: (other than parent/guardian)

(1) _____
Name _____ Relationship to Student _____
Phone Number _____ Other Contact Information _____

(2) _____
Name _____ Relationship to Student _____
Phone Number _____ Other Contact Information _____

Primary Care Physician's Name and Contact Information (in case of an emergency):

Health Insurance Provider's Name, Policy #, and Contact Information (in case of emergency):

Insurance Provider Claim Instructions/Procedures (in case of emergency):

Student has the following health issues and/or allergies of which SPS should be aware:
Health Issues

Allergies (food, medication, insects, plants, animals, etc)

Student takes the following medications and/or prescriptions of which SPS should be aware

List requirements/directions for administration of this medication

If medication is taken on an as-needed basis, specify the symptoms or conditions when medication is to be taken and the time at which it may be given again

Is there any factor that makes it advisable for your child to follow a limited program of physical activity (i.e. asthma, recent surgery, heart condition, abnormal fear, etc)?

If yes, specify the ways in which you wish his/her program limited

Additional information of which SPS should be aware concerning student's health

I authorize the release of the information given above to other school staff in order to coordinate services.

Student Signature, if at least 18 years of age

Date

Parent/Guardian Signature, if student is under 18 years of age

Date

- * If necessary, attach doctor's letter to this form
 - * If necessary, attach copies that document student's shots and immunizations to this form
-

GARFIELD FIELD TRIP BEHAVIOR CONTRACT | 09.15.2015

Field Trips are a group experience and much is expected of each individual for maximum harmony to exist. Parents/Guardians and students please read this contract together, sign at the bottom and return to the Lead Organizer of the field trip. This form must be signed and turned in prior to departing on the field trip.

Field Trip Name: DAY OF SERVICE AT WASHINGTON MIDDLE SCHOOL

Time/Date of Field Trip: WEDNESDAY, OCTOBER 14th 8:45am - 2:20pm

Lead Organizer(s) Name(s): TIFFANY LYNN BIGHAM

Contact Information: TLBIGHAM@SEATTLE.SCHOOLS.ORG

If you have any questions, suggestions or concerns, please speak with the Lead Organizer(s) of this field trip.

STUDENT BEHAVIOR EXPECTATIONS:

- 1) Students will conduct themselves in a safe and respectful manner at all times. They will follow ANY adult's direction or request immediately without argument or question.
- 2) Students will not participate in any form of violent behavior.
- 3) Students will not participate in any hazing, bullying, intimidation, threats of violence, harassment or any form of inappropriate controlling, either verbal or physical.
- 4) Students are not to leave or separate themselves from the group at any time, unless approved to do so by the Lead Organizer(s) or Chaperone(s).
- 5) Students will stay out of other peoples' belongings (no stealing or unauthorized borrowing).
- 6) Students will not damage or deface any property. Families will be held responsible for any monetary reimbursements due to property owners.
- 7) Students will not bring objects that are deemed dangerous or disruptive, (pocket knives, fireworks, pellet guns, etc.) and subsequently will not possess or use any illegal objects. Use of personal entertainment devices are solely at the discretion of Lead Organizer(s) or Chaperone(s).
- 8) The presence of alcohol, drugs, or tobacco products will result in immediate parent/guardian contact, being sent home, and the same school district consequences as if the incident occurred on school grounds. No refund will be given if the student is sent home.
- 9) Students will not use verbally inappropriate or abusive language or physically inappropriate or abusive actions at any time during the field trip.
- 10) Students must be on time to all activities. A schedule will be provided to each student.
- 11) When staying at a motel, hotel or other accommodations, students will be respectful of other guests at that location. Students will enter the facility quietly and show courtesy to others during the group's stay.
- 12) Members of the opposite sex are not allowed into each other's rooms at ANY time.
- 13) Quiet hours are from 10:30 p.m. to 6:00 a.m. each day.
- 14) There is a 10:30pm curfew – all students must be in their assigned rooms for the night. Tape will be placed on doors at 10:30pm and students are not to leave their rooms after curfew. (The only exception is if there is a group activity that last past curfew. If this occurs, curfew is as soon as the group returns for the night.)

These expectations are not intended to be all-inclusive, and any action deemed unsuitable or unsafe may be subject to the disciplinary actions outlined below. Please note that the Lead Organizer(s) and/or Chaperones and/or anyone providing support of any kind (to include transportation) are able to assign and enforce these discipline measures.

GARFIELD FIELD TRIP BEHAVIOR CONTRACT | 09.15.2015

DISCIPLINARY PROCEDURES:

Depending on the severity of the offense, the following actions may be taken:

1. The student will be warned against future infractions.
2. The student may be removed from the situation and asked to stay with an approved Chaperone. A parent will be notified of the situation.
3. If damages are involved, the student will be responsible for their repair. A parent or guardian is ultimately responsible for any damages incurred by their child.
4. A parent may be notified and asked to come and remove the student from the field trip. Parents will be responsible for any cost incurred in sending their student home due to disciplinary action.
5. In the interest of safety the Lead Organizer(s) or Chaperone(s) reserve the right to withhold a student from any activity during the field trip.

STUDENT/PARENT/GUARDIAN INFORMATION:

Attendance:

- Attendance is taken by name before we leave for the trip, as well before leaving any location.
- The roster is critical to keeping attendance organized.
- Please do not be late in dropping off or picking up your student.
- Upon returning from a trip, all students must be picked up by a parent/guardian or their designee. No student will be allowed to drive or walk home from school upon our return without written permission from their parent/guardian.

Chaperone System:

- Chaperones work directly with the Lead Organizer(s) to coordinate the activities each day. If and when a Chaperone is assigned to a specific group of students, the Chaperone will set an emergency meeting location for their group, in the event that any student gets separated.

We encourage you to review these policies and address any questions to the Lead Organizer(s) prior to the field trip. At your request, we can provide additional copies of this contract for your records. By signing this contract, you are affirming that you and your student are aware of, and accept the behavior expectations and the disciplinary measures that are in place for your student while participating in this field trip.

Student's Name (Print): _____

Student's Name (Signature): _____ Date: _____

Parent/Guardian's Name (Print): _____

Parent/Guardian's Name (Signature): _____ Date: _____

**Parent/Guardian
Elective Course, Program or Activity
Student Transportation Agreement**



Name of Student *(Please Print)*

Name of Parent/Guardian *(Please Print)*

Name of elective course, program or activity
(e.g., music, PE, art, course, ASB, etc.)

Indicate semester or quarter

School year

SCHOOL-SPONSORED

1ST SEMESTER

2019-20

I am the parent or guardian of the student identified above. I wish for my student to participate in the elective course, program or activity identified above.

I understand that the curriculum or programmatic requirements of this course, program or activity may require my student to attend activities away from his or her school campus, as follows:

Off-campus location: WASHINGTON MIDDLE SCHOOL 2101 S. JACKSON ST. SEATTLE, WA 98144

Schedule for off-campus program:

8:45 am: SENIORS ARRIVE TO GARFIELD AUDITORIUM (QUINCY JONES PERFORMING ARTS CENTER)

9:00 am: WALK TO WASHINGTON MIDDLE SCHOOL

9:15 am: ARRIVE AT WASHINGTON MIDDLE SCHOOL FOR DAY OF SERVICE

11:55 am: LUNCH AT WASHINGTON MIDDLE SCHOOL

2:00 pm: WALK BACK TO GARFIELD HIGH SCHOOL

I understand that the District will not provide transportation for my student's participation in the off-campus activities of this elective course, program or activity. I understand that I am therefore responsible for arranging my student's transportation to and from the off-campus activities.

I affirm that any decision I make to allow my student to ride to the off-campus activities in a vehicle driven by anyone other than me, including one driven by my student himself or herself, is a decision to be made solely by me, based upon my discretion as a parent or guardian and my own assessment of the safety of allowing such transportation to occur.

In requesting that my student be allowed to participate in this elective course, program or activity, I agree that no person shall be considered an agent or servant of the District, in any respect or for any purpose, whatsoever, while driving my student to or from this elective course or program. Should any claim be made against the District based on the driving conduct of any person transporting my student to or from the off-campus activities involved in this elective course, program or activity, I hereby agree to defend, indemnify, and hold the District harmless as to such claim.

X

Parent/Guardian Signature

Date Signed

Signed Original
Copy

To be filed with principal's office prior to an off-campus travel
teacher

