

**Franklin Public Schools
Franklin, Massachusetts 02038**

Action Required

Subject:

Out of State Travel

Date:

January 8, 2019

Dept:

FHS

Reason:

Past practice of the Committee requires a vote to allow students/staff to travel outside of the State/Country

Enclosure

Yes

Background

Recommendation:

FHS Jazz Festival Trip

I recommend approval of the request of Leighanne Rudsit for the recurring trip to UNH, Durham, NH on March 9, 2019 for the Jazz Festival as detailed.

Action Requested of the School Committee:

Majority vote of the Committee is required.

<u>Vote Tabulator</u>	
A. Bergen: Y / N	D. Schultz: Y / N
C. Douglas: Y / N	MJ Scofield: Y / N
D. Feeley: Y / N	G. Zub: Y / N
M. Linden: Y / N	Action: _____

FRANKLIN HIGH SCHOOL FIELD TRIP REQUEST FORM

Important Reminders:

- This form should be completed by the supervising staff member of the field trip.
- Please submit this request at least four weeks prior to the requested date.
- Please submit a hard copy of this form with the list of students attending attached to Maria Weber.
- There should be no cost to students for field trips scheduled during the school day.
- Take attendance and inform Jen Petrillo prior to leaving for the field trip.
- No field trips may be taken before September 15 and after June 1 or during the last 2 weeks of a term.

Please refer the FHS Faculty Handbook for more information about field trips including the Extended Field Trip policy and its approval process.

Once the field trip is approved, the list of students will be forwarded to the nurse who will assess any medical needs. The supervising staff member will be notified via email about the approval of the field trip and any medical concerns. Please read this Situational Responsibilities document from the nurse's office.

Field Trip Information:

Supervising staff member: LEIGHANNE RUOSTI Cell #: 617-777-6186

Other teachers/staff attending: MATTHEW GETSINGER

Date of field trip: 3/9/19 Destination: UNH - Durham NH

Departure time: 7:00am Return time: 11:00pm Mode of transportation: BUS

Course name and section # of class(es) attending:

Jazz Band (After School) #1806

Please provide a brief explanation of the purpose of this field trip.

Clark Terry - UNH Jazz Festival

Request Class Coverage/Substitute Coverage:

If two or more periods need to be covered, a professional day request must be filled out and approved prior to submitting field trip request. [CLICK HERE](#)

If just one period coverage is needed, [CLICK HERE](#)

Department Head: Diane Blouffe Date: 1/2/19

Assistant Principal: [Signature] Date: 1/2/19

Principal (Extended FT): [Signature] Date: 1/2/19

Reviewed by Nurse: _____ Nurse recommended? (Y) (N) Date: _____

Extended Field Trip Form

Leighanne Rudsit - Clark Terry/UNH Jazz Festival - Saturday, March 9th, 2019
2 Jazz Bands, 1 Jazz Combo

- a. Destination - University of New Hampshire, Durham NH
- b. Departure/Return Times - 7:00am Depart / 11:00pm Return, March 9th
- c. Itinerary - 2 Jazz Big Bands & the Jr./Sr. Jazz Combo to perform for adjudication throughout the day followed by an evening concert by professionals at 7:00pm
- d. Summary/Purpose/Educational Alignment - Musical Performance with adjudication
- e. Trip Expense - \$680 Total Festival Fees & \$1,000 Bus Charge, paid by FHS Music Budget
- f. Description of how accessible to limited income families / Fundraising plan
(Free for participating students)
- g. Accessibility for students with disabilities - Yes
- h. Number of students needed to support trip - 37
- i. Number of chaperones in attendance - 2
- j. Method of Transportation/Travel Agency/Organization Info - Holmes Bus
- k. Documentation that all students, advisors, chaperones have full trip insurance
- l. Emergency plan/medical care plan/administration of medication
(Health Services On-Site)
- m. CORI for Chaperones
- n. Extended Field Trip Waiver Form for Overnight trips

FRANKLIN HIGH SCHOOL FIELD TRIP PERMISSION FORM (In-School or Out-of-School)

Supervising staff member: Leighanne Rodsij

★ Student name: _____

Date of trip: 3/9/19 Destination: UNH - Durham NH
~~-In school auditorium~~

Departure time: 7:00am Return time: 11:00pm

Mode of transportation: BUS Cost: _____

Meal arrangements: Bring Food or Buy there

Educational objective for trip:

UNH - Clark Terry Jazz Festival

In order for students to be eligible for this trip, approval must be granted by parent (or guardian) and also by the teachers whose classes will be missed. Students are required to make-up all work missed and are responsible for all assignments issued. All school rules and regulations apply during the time away from school. This form must be completed and returned to the Supervising Staff member by no later than two (2) weeks prior to the date of the trip.

Teacher Signature: _____

Student must bring this form to each of their teachers to review and sign.

Period	Course	Approved	Not Approved	(if not approved, rationale)
A				
B				
C				
D				
E				
F				
G				

Saturday


To Parents (To be completed and signed by parent/guardian):

In order to protect your child more fully, your cooperation is requested in providing the information below. Illness and accidents do occur, and the information you provide may be of help to your child. In case of accident, we attempt to notify parents, but this is not always possible.

As a matter of law, the School Department cannot pay for medical treatment, other than first aid, for a child who is injured at school or on an in-school or out-of-school field trip. I understand that a field trip nurse may not be in attendance.

If one or both parents work, please give the name of a person who will be responsible for the child (perhaps your next door neighbor).

The parent will, of course, be notified by telephone if there is a telephone connection. If you do not have a telephone, or if you work during the day away from home, what provision do you wish to make for the child's transportation?

 Signature of parent/guardian _____ Date _____

It is our hope that the information on this form will never be used, but it can be of real importance if an accident does occur.

**PARENTS SHOULD BE PREPARED TO TRAVEL TO THE FIELD TRIP SITE
IN CASE OF ILLNESS OR OTHER EMERGENCIES.**

 Student name: _____

Home address: _____

Home phone number: _____

Parent name and phone number: _____

Parent name and phone number: _____

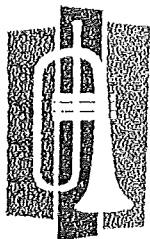
Persons to contact if parents are not available:

Name and phone number: _____

Name and phone number: _____

Name and phone number of family physician:

**PLEASE LIST (BELOW) ANY ALLERGIES, MEDICATIONS OR OTHER MEDICAL INFORMATION
THE TEACHER OR ANY ATTENDING PHYSICIAN MAY NEED.**



CLARK TERRY
UNH JAZZ FESTIVAL

Festival Date: March 9, 2019

Application Deadline: February 1, 2019

(Space is limited. Applications will be honored on a first come, first served basis)

School FRANKLIN HIGH SCHOOL Director LEIGHANNE RUDSIT

School Address 218 OAK ST FRANKLIN, NH 02038

School Phone 508-617-1400 Director Cell 617-777-6136

Director Email rudsit1@franklinps.net Are you arriving the night before? ☐ Yes ☒ No

School Enrollment (H.S. only) 1700

** Please note that class category will be determined once registration closes.

JAZZ BAND 1

Ensemble Registration: Bands- \$250 & Jazz Combos- \$100

Sr. High Jazz Bands \$ 250 Director Email Address rudsit1@franklinps.net

Middle School Bands \$ _____ Director Email Address _____

Jazz Combo \$ 100 Director Email Address rudsit1@franklinps.net

Tickets

Guests/Chaperones Festival Tickets Number _____ X \$2.00 = _____

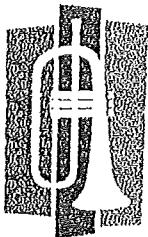
Evening Performance Tickets (30 ticket max) Number 22 X \$2.00 = \$ 44

Registration and Payment: Registration forms must be emailed to Lyndsay Boysen, lyndsay.boysen@unh.edu. Check or Purchase Order must be enclosed with a copy of registration. All checks should be made payable to "UNH Jazz Festival" and mailed to:

Clark Terry UNH Jazz Festival
Attn: Nathan Jorgensen
Department of Music-PCAC
30 Academic Way
Durham, NH 03824

Cancellation Policy: In the unlikely event that UNH must cancel the Clark Terry Festival, one half of the registration fee and all ticket money will be refunded. In the event that an individual school cancels, no refund will be given.

If you have any questions regarding registration for the Clark Terry UNH Festival, please contact Nathan Jorgensen at Nathan.Jorgensen@unh.edu



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School FRANKLIN HIGH SCHOOL Director MATTHEW GELSINGER

School Address 218 OAK ST. FRANKLIN, MA 02038

School Phone 508-613-1400 Director Cell 781-801-5825

Director Email geisinger m@franklinhs.net Are you arriving the night before? ☐ Yes ☒ No

School Enrollment (H.S. only) 1760

** Please note that class category will be determined once registration closes.

JAZZ BAND 2

Ensemble Registration: Bands- \$250 & Jazz Combos- \$100

Sr. High Jazz Bands \$ 250 Director Email Address geisinger m@franklinhs.net

Middle School Bands \$ _____ Director Email Address _____

Jazz Combo \$ _____ Director Email Address _____

Tickets

Guests/Chaperones Festival Tickets Number _____ X \$2.00 = _____

Evening Performance Tickets (30 ticket max) Number 17 X \$2.00 = \$ 34

Registration and Payment: Registration forms must be emailed to Lyndsay Boysen, lyndsay.boysen@unh.edu. Check or Purchase Order must be enclosed with a copy of registration. All checks should be made payable to "UNH Jazz Festival" and mailed to:

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Department of Music-PCAC
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