Guide for Certifying and Approving a Field Trip

Table of Contents

...

General Information

For information on how to login, please refer to the "How to Login, Dashboard, and Trip History" User Guide.

Identifying a Field Trip Request for Certification or Approval

Field trips listed as **"Submitted", "Modification Submitted",** or **"Pending Approval"** in the Status column need to be approved or certified.

Certifying a Field Trip Request

1. To start certifying a field trip, after signing in as an approver, locate and click the reference number.

Alternatively, search for trip reference number in the **Seach by Keyword** textbox.

2. Click on the **Approve / Reject** ✓ Approve / Reject button views the trip summary. All applicable approvers' subtabs will be expanded to see their relevant declarations.

Active Trip Requests									
Reference Number	Trip Type	School	Destination	Depart ▲	Return	Bus Information	Status		Action
25-1801	Field Trip	BELMONT SH	LE CONTE MS	1/29/2025	1/29/2025	🚌	Pending Approval		🔘
25-1764	Field Trip	BELMONT SH	ST ELIZABETH	1/29/2025	1/29/2025	🚌	Modification Submitted		🔘🔴🔘
25-1047	Field Trip	BELMONT SH	LAUREL HALL SCHOOL	1/29/2025	1/29/2025	🚌	Submitted		🔘

Summary	Requestor	Principal	Nurse	Outdoor & Env Ed	Athletics	Env Health & Safety	Risk Management	Student Integration	Title 1	Region	Dept. Supt.Instruction	Trans-Acctg	Trans Dispatch	Modification
📋	✓	—	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

✓ Approve / Reject

Principal Approval

a. By checking the boxes below, the Principal certifies that all statements are true. Optionally, additional notes about the field trip can be entered in the **Comments** section.

Principal Certification ▾

Check each box where the statement is true:

☐ Complies with regulations and policies.
☐ At least 1 certificated staff member will be in attendance during this trip.
☐ I have confirmed the funding source(s) for this field trip and certify that these funds are currently available.
☐ I have reviewed and approved the reimbursement of expenses as requested in this field trip request.
☐ I understand that final approval of this field trip does not confirm availability of these funds.
☐ Provides educational value.
☐ Locations of nearest emergency facilities have been obtained.
☐ Basic First Aid kit is available and will be taken on the trip.
☐ All parent/guardian permission slips will be obtained prior to trip and kept on file at the school for 7 years.
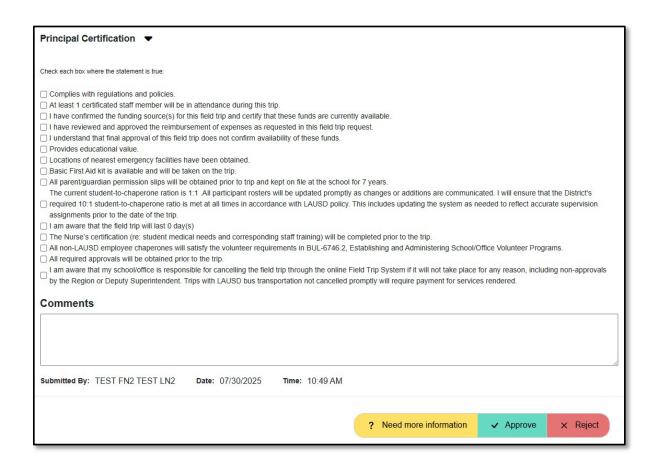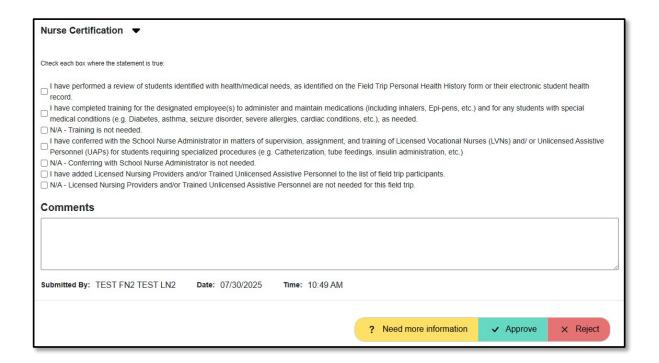☐ The current student-to-chaperone ration is 1:1 .All participant rosters will be updated promptly as changes or additions are communicated. I will ensure that the District's required 10:1 student-to-chaperone ratio is met at all times in accordance with LAUSD policy. This includes updating the system as needed to reflect accurate supervision assignments prior to the date of the trip.
☐ I am aware that the field trip will last 0 day(s)
☐ The Nurse's certification (re: student medical needs and corresponding staff training) will be completed prior to the trip.
☐ All non-LAUSD employee chaperones will satisfy the volunteer requirements in BUL-6746.2, Establishing and Administering School/Office Volunteer Programs.
☐ All required approvals will be obtained prior to the trip.
☐ I am aware that my school/office is responsible for cancelling the field trip through the online Field Trip System if it will not take place for any reason, including non-approvals by the Region or Deputy Superintendent. Trips with LAUSD bus transportation not cancelled promptly will require payment for services rendered.

Comments

[   ]

Submitted By: TEST FN2 TEST LN2   **Date:** 07/30/2025   **Time:** 10:49 AM

[? Need more information] [✓ Approve] [✗ Reject]

Nursing Approval

> b. By checking the boxes below, the Nurse certifies that all statements are true.

Nurse Certification ▼

Check each box where the statement is true:

☐ I have performed a review of students identified with health/medical needs, as identified on the Field Trip Personal Health History form or their electronic student health record.

☐ I have completed training for the designated employee(s) to administer and maintain medications (including inhalers, Epi-pens, etc.) and for any students with special medical conditions (e.g. Diabetes, asthma, seizure disorder, severe allergies, cardiac conditions, etc.), as needed.

☐ N/A - Training is not needed.

☐ I have conferred with the School Nurse Administrator in matters of supervision, assignment, and training of Licensed Vocational Nurses (LVNs) and/ or Unlicensed Assistive Personnel (UAPs) for students requiring specialized procedures (e.g. Catheterization, tube feedings, insulin administration, etc.)

☐ N/A - Conferring with School Nurse Administrator is not needed.

☐ I have added Licensed Nursing Providers and/or Trained Unlicensed Assistive Personnel to the list of field trip participants.

☐ N/A - Licensed Nursing Providers and/or Trained Unlicensed Assistive Personnel are not needed for this field trip.

Comments

Submitted By: TEST FN2 TEST LN2   **Date:** 07/30/2025   **Time:** 10:49 AM

[? Need more information]   [✓ Approve]   [✗ Reject]

Title 1 Approval

c. By checking the boxes below, the Title 1 Approver certifies that all statements are true.

Title 1 Certification ▼

Check each box where the statement is true:

☐ The trip is addressed in the school's SPSA.
☐ Then trip supplements the core instructional program and improves academic achievement for at-risk students.
☐ Title 1 funds are approved for this trip.

Comments

Estimated number of buses for this trip = 1

? Need more information   ✓ Approve   ✕ Reject

Transportation-Dispatch Approval

    d.   By checking the box below, Transportation Dispatch certifies that all statements are true.

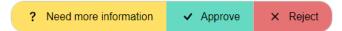**Dispatch Certification** ▼

Check each box where the statement is true:

☐ I approve of the exception(s)

Comments

Submitted By: admin01   Date: 02/25/2025   Time: 09:39 AM

Certification ▼

?   Need more information   ✓ Approve   ✗ Reject

Regional Approval

a. By checking the box below, Region certifies that all statements are true.

Region Certification ▾

Check each box where the statement is true:

☐ Complies with regulations and policies.
☐ At least 1 certificated staff member will be in attendance during this trip.
☐ I have reviewed the funding source(s) for this field trip and certify that these funds are currently available and allowed through that program code.
☐ If applicable, I have reviewed and approved the reimbursement of expenses as requested in this field trip request.
☐ I understand that final approval of this field trip does not confirm availability of these funds.
☐ Provides educational value.
☐ Locations of nearest emergency facilities have been obtained.
☐ All parent/guardian permission slips will be obtained prior to trip and kept on file at the school for 7 years.
☐ The current student-to-chaperone ration is 1:1 .The school administrator will ensure that the District's required 10:1 student-to-chaperone ratio is met at all times in accordance with LAUSD policy. This includes updating the system as needed to reflect accurate supervision assignments prior to the date of the trip.
☐ I am aware that the field trip will last 0 day(s)
☐ The Nurse's certification (re: student medical needs and corresponding staff training) will be completed prior to the trip.
☐ All required approvals will be obtained prior to the trip.
☐ I have confirmed that all required documents have been uploaded into the system for this trip.

Comments

[   ]

Submitted By: TEST FN2 TEST LN2   **Date:** 07/30/2025   **Time:** 10:49 AM

[? Need more information] [✓ Approve] [✗ Reject]

Other Approval

  b. For all other approvals no additional declaration is needed.

3. Click on either **"Approve"** or **"Reject"** or request more information on that trip by clicking on the **"Need more information"** button.

4. A confirmation pop-up message will appear. Click the **"OK"** button to close the window.

5. Once all approvers have approved the field trip request, the status will display as **"Approved"** on the dashboard.