



FIELD TRIP DRIVER'S LICENSE AND VEHICLE INSURANCE INFORMATION

(required when transporting students on field trips
in personal or leased vehicles)

Information on the driver and the driver's liability insurance is required for all personal and leased vehicles used to transport students (not applicable for school bus or commercial bus drivers or vehicles). This is an official FCPS document. Any falsification or misrepresentation may lead to disciplinary action for FCPS Staff or liability exposure for other drivers.

FIELD TRIP PLAN (to be completed by the trip organizer)

Specific Trip	Repeated Trip
Date 8/1/23	Explain N/A
Destination Bowlero	
Purpose Band camp field trip	
Student name(s) _____	

DRIVER AND INSURANCE INFORMATION

PART I. DRIVER			
Name _____			
<input type="checkbox"/> Student	<input type="checkbox"/> Parent	<input type="checkbox"/> Teacher or Staff Member (Part II required)	<input type="checkbox"/> Other
Operator License Number _____	State _____	<input type="checkbox"/> Expiration Date _____	
<input type="checkbox"/> I certify that I have a valid driver's license as indicated I certify that the vehicle I will use for this field trip: <ul style="list-style-type: none"> <input type="checkbox"/> is designed and manufactured to transport fewer than ten passengers <input type="checkbox"/> meets Federal Motor Vehicle Safety Standards and state standards applicable to passenger car occupant protection standards (at the time the vehicle was manufactured) <input type="checkbox"/> has a certified seat and seat belt for each passenger (owner- or dealer-installed seats and/or seat belts are not certified) 			
Driver Signature _____		Date _____	

PART II. FCPS STAFF ONLY	
<input type="checkbox"/> I understand and acknowledge that the validity of my license and my driving record may be reviewed by FCPS Human Resources <input type="checkbox"/> I have taken the online defensive driving tutorial offered by SafeSchools™ https://fairfax-va.safeschools.com/login	

PART III. INSURANCE	
Owner or Lessee of Insured Vehicle _____	
Insurer _____	
Vehicle Make _____	Model _____
Owner or Lessee Signature _____	
Date _____	

SCHOOL PRINCIPAL APPROVAL	
_____ Principal Signature	_____ Date <u>7/20/23</u>



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FIELD TRIP PLAN (to be completed by the trip organizer)

Specific Trip	Repeated Trip
Date 8/8/23	Explain N/A
Destination Cinemark Fairfax Corner	
Purpose Band camp field trip	
Student name(s) _____	

DRIVER AND INSURANCE INFORMATION

PART I. DRIVER			
Name _____			
<input type="checkbox"/> Student	<input type="checkbox"/> Parent	<input type="checkbox"/> Teacher or Staff Member (Part II required)	<input type="checkbox"/> Other
Operator License Number _____	State _____	<input type="checkbox"/> <input type="checkbox"/>	Expiration Date _____
<input type="checkbox"/> I certify that I have a valid driver's license as indicated			
I certify that the vehicle I will use for this field trip:			
<input type="checkbox"/> is designed and manufactured to transport fewer than ten passengers			
<input type="checkbox"/> meets Federal Motor Vehicle Safety Standards and state standards applicable to passenger car occupant protection standards (at the time the vehicle was manufactured)			
<input type="checkbox"/> has a certified seat and seat belt for each passenger (owner- or dealer-installed seats and/or seat belts are not certified)			
Driver Signature _____		Date _____	

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PART III. INSURANCE	
Owner or Lessee of Insured Vehicle _____	
Insurer _____	
Vehicle Make _____	Model _____
Owner or Lessee Signature _____	Date _____

SCHOOL PRINCIPAL APPROVAL
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> _____ Principal Signature </div> <div style="width: 30%;"> 7/20/23 _____ Date </div> </div>



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FIELD TRIP PLAN (to be completed by the trip organizer)

Specific Trip	Repeated Trip
Date 9/9/23	Explain N/A
Destination Homes within the OHS boundary	
Purpose Tag Day	
Student name(s) _____	

DRIVER AND INSURANCE INFORMATION

PART I. DRIVER			
Name _____			
<input type="checkbox"/> Student	<input type="checkbox"/> Parent	<input type="checkbox"/> Teacher or Staff Member (Part II required)	<input type="checkbox"/> Other
Operator License Number _____		State _____	Expiration Date _____
<input type="checkbox"/> I certify that I have a valid driver's license as indicated			
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<input type="checkbox"/> is designed and manufactured to transport fewer than ten passengers			
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Driver Signature _____		Date _____	

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Owner or Lessee of Insured Vehicle _____	
Insurer _____	
Vehicle Make _____	Model _____
Owner or Lessee Signature _____	
Date _____	

SCHOOL PRINCIPAL APPROVAL	
Principal Signature <i>Jamie S. Lane</i>	Date 7/20/23



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FIELD TRIP PLAN (to be completed by the trip organizer)

Specific Trip	Repeated Trip
Date 9/23/23	Explain N/A Student name(s) _____
Destination Colgan HS	
Purpose Marching competition	

DRIVER AND INSURANCE INFORMATION

PART I. DRIVER			
Name _____			
<input type="checkbox"/> Student	<input type="checkbox"/> Parent	<input type="checkbox"/> Teacher or Staff Member (Part II required)	<input type="checkbox"/> Other
Operator License Number _____	State _____	<input type="checkbox"/>	Expiration Date _____
<input type="checkbox"/> I certify that I have a valid driver's license as indicated I certify that the vehicle I will use for this field trip: <ul style="list-style-type: none"> <input type="checkbox"/> is designed and manufactured to transport fewer than ten passengers <input type="checkbox"/> meets Federal Motor Vehicle Safety Standards and state standards applicable to passenger car occupant protection standards (at the time the vehicle was manufactured) <input type="checkbox"/> has a certified seat and seat belt for each passenger (owner- or dealer-installed seats and/or seat belts are not certified) 			
Driver Signature _____		Date _____	

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Insurer _____	
Vehicle Make _____	Model _____
Owner or Lessee Signature _____	Date _____

SCHOOL PRINCIPAL APPROVAL	
Principal Signature <i>Jamie S Lane</i>	Date 7/20/23



FIELD TRIP DRIVER'S LICENSE AND VEHICLE INSURANCE INFORMATION

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FIELD TRIP PLAN (to be completed by the trip organizer)

Specific Trip	Repeated Trip
Date 9/30/23	Explain N/A Student name(s) _____
Destination Herndon HS	
Purpose Marching competition	

DRIVER AND INSURANCE INFORMATION

PART I. DRIVER			
Name _____			
<input type="checkbox"/> Student	<input type="checkbox"/> Parent	<input type="checkbox"/> Teacher or Staff Member (Part II required)	<input type="checkbox"/> Other
Operator License Number _____	State _____	<input type="checkbox"/>	Expiration Date _____
<input type="checkbox"/> I certify that I have a valid driver's license as indicated I certify that the vehicle I will use for this field trip: <ul style="list-style-type: none"> <input type="checkbox"/> is designed and manufactured to transport fewer than ten passengers <input type="checkbox"/> meets Federal Motor Vehicle Safety Standards and state standards applicable to passenger car occupant protection standards (at the time the vehicle was manufactured) <input type="checkbox"/> has a certified seat and seat belt for each passenger (owner- or dealer-installed seats and/or seat belts are not certified) 			
Driver Signature _____		Date _____	

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Owner or Lessee of Insured Vehicle _____	
Insurer _____	
Vehicle Make _____	Model _____
Owner or Lessee Signature _____	Date _____

SCHOOL PRINCIPAL APPROVAL	
Principal Signature <i>Jamie Shar</i>	Date 7/20/23



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FIELD TRIP PLAN (to be completed by the trip organizer)

Specific Trip	Repeated Trip
Date 10/7/23	Explain N/A Student name(s) _____
Destination Woodgrove HS	
Purpose Marching competition	

DRIVER AND INSURANCE INFORMATION

PART I. DRIVER			
Name _____			
<input type="checkbox"/> Student	<input type="checkbox"/> Parent	<input type="checkbox"/> Teacher or Staff Member (Part II required)	<input type="checkbox"/> Other
Operator License Number _____		State <input type="checkbox"/> _____	Expiration Date _____
<input type="checkbox"/> I certify that I have a valid driver's license as indicated I certify that the vehicle I will use for this field trip: <ul style="list-style-type: none"> <input type="checkbox"/> is designed and manufactured to transport fewer than ten passengers <input type="checkbox"/> meets Federal Motor Vehicle Safety Standards and state standards applicable to passenger car occupant protection standards (at the time the vehicle was manufactured) <input type="checkbox"/> has a certified seat and seat belt for each passenger (owner- or dealer-installed seats and/or seat belts are not certified) 			
Driver Signature _____		Date _____	

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Owner or Lessee of Insured Vehicle _____	
Insurer _____	
Vehicle Make _____	Model _____
Owner or Lessee Signature _____	
Date _____	

SCHOOL PRINCIPAL APPROVAL	
Principal Signature <i>Jamie D Lane</i>	Date 7/20/23



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FIELD TRIP PLAN (to be completed by the trip organizer)

Specific Trip	Repeated Trip
Date 10/23/23	Explain N/A Student name(s) _____
Destination Massaponax HS	
Purpose Marching Band State Assessment	

DRIVER AND INSURANCE INFORMATION

PART I. DRIVER			
Name _____			
<input type="checkbox"/> Student	<input type="checkbox"/> Parent	<input type="checkbox"/> Teacher or Staff Member (Part II required)	<input type="checkbox"/> Other
Operator License Number _____	State _____	<input type="checkbox"/>	Expiration Date _____
<input type="checkbox"/> I certify that I have a valid driver's license as indicated			
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Driver Signature _____		Date _____	

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Insurer _____	
Vehicle Make _____	Model _____
Owner or Lessee Signature _____	
Date _____	

SCHOOL PRINCIPAL APPROVAL	
_____ Principal Signature	_____ Date <u>7/20/23</u>



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FIELD TRIP PLAN (to be completed by the trip organizer)

Specific Trip	Repeated Trip
Date 11/3/23	Explain N/A Student name(s) _____
Destination Chantilly HS	
Purpose Away football game	

DRIVER AND INSURANCE INFORMATION

PART I. DRIVER			
Name _____			
<input type="checkbox"/> Student	<input type="checkbox"/> Parent	<input type="checkbox"/> Teacher or Staff Member (Part II required)	<input type="checkbox"/> Other
Operator License Number _____	State _____	<input checked="" type="checkbox"/>	Expiration Date _____
<input type="checkbox"/> I certify that I have a valid driver's license as indicated I certify that the vehicle I will use for this field trip: <ul style="list-style-type: none"> <input type="checkbox"/> is designed and manufactured to transport fewer than ten passengers <input type="checkbox"/> meets Federal Motor Vehicle Safety Standards and state standards applicable to passenger car occupant protection standards (at the time the vehicle was manufactured) <input type="checkbox"/> has a certified seat and seat belt for each passenger (owner- or dealer-installed seats and/or seat belts are not certified) 			
Driver Signature _____		Date _____	

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Insurer _____	
Vehicle Make _____	Model _____
Owner or Lessee Signature _____	Date _____

SCHOOL PRINCIPAL APPROVAL	
Principal Signature <i>Jamie D Lane</i>	Date <i>7/20/23</i>



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FIELD TRIP PLAN

(to be completed by the trip organizer)

Specific Trip	Repeated Trip
Date 3/15/24 and 3/16/24	Explain N/A
Destination Washington-Liberty HS	
Purpose Concert Band Assessment	
Student name(s) _____	

DRIVER AND INSURANCE INFORMATION

PART I. DRIVER			
Name _____			
<input type="checkbox"/> Student	<input type="checkbox"/> Parent	<input type="checkbox"/> Teacher or Staff Member (Part II required)	<input type="checkbox"/> Other
Operator License Number _____	State _____	<input type="checkbox"/> <input type="checkbox"/>	Expiration Date _____
<input type="checkbox"/> I certify that I have a valid driver's license as indicated			
I certify that the vehicle I will use for this field trip:			
<input type="checkbox"/> is designed and manufactured to transport fewer than ten passengers			
<input type="checkbox"/> meets Federal Motor Vehicle Safety Standards and state standards applicable to passenger car occupant protection standards (at the time the vehicle was manufactured)			
<input type="checkbox"/> has a certified seat and seat belt for each passenger (owner- or dealer-installed seats and/or seat belts are not certified)			
Driver Signature _____		Date _____	

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Owner or Lessee of Insured Vehicle _____	
Insurer _____	
Vehicle Make _____	Model _____
Owner or Lessee Signature _____	Date _____

SCHOOL PRINCIPAL APPROVAL
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p style="font-size: 1.2em; font-family: cursive;">Jamie S Lane</p> <p>Principal Signature _____</p> </div> <div style="width: 35%;"> <p style="font-size: 1.2em; font-family: cursive;">7/20/23</p> <p>Date _____</p> </div> </div>