

## Lake Orion Community Schools

## FIELD TRIP PARENTAL CONSENT - TRANSPORTATION FORM

To: Parent/Legal Guardian		IDENT TO A SCHOOL-SPONSORED ACTIVITY, AS DESCRIBED BELOW:				
Traveling To:						
DATE OF ACTIVITY:		Traveling Via:				
In the event of a cancellation, an alternate date may be established		Under NO circumstance will high school students be permitted to drive other students.				
For:						
Participating students will leave the school at:		RETURN AT APPROXIMATELY:				
Students will be supervised by:						
Additional comments/information:						
Teacher's Signature:			DATE			
NO student will be denied the rig Contac	ht to participate on t your building adm	a field trip activity of the contraction of the con	due to financial circumstances. ation.			
0						
	<del></del>					
	Parent/Legal Gu	IABDIAN CONSENT				
	T ARENT/ LEGAL GC	IARDIAN CONSENT				
Please complete this statement ai	ND RETURN TO THE SO	CHOOL BY:				
I, the undersigned parent/legal g	Uardian of					
DO HERE			TD AVEL			
	By Grant Permission	FOR THIS STUDENT TO	IRAVEL			
To:		ON:				
To:		ON:				
To:						
To:		ON:				



## **ADMINISTRATIVE SERVICES**

315 N. Lapeer Street Lake Orion, MI 48362

> PHONE: 248 • 693 • 5400 Fax: 248 • 693 • 5466

## Field Trip Chaperones and Volunteers Criminal Conviction History Form

I understand that as a Field Trip Volunteer/Chaperone of Lake Orion Community Schools, I am subject to a criminal conviction history check to ensure the safety of all children.

I understand that the information below is required by Lake Orion Community Schools to conduct a criminal conviction history check using the Michigan State Police Internet Criminal History Tool (ICHAT). I authorize Lake Orion Community Schools to utilize this information for the sole purpose of obtaining a conviction-only history file search. All information received will be held in confidence. Any questionable results will be reviewed by the Assistant Superintendent of Human Resources.

name (Piease Pilint)	Last Name		Maiden Name/	Other	First Name	MI	
Date of Birth:/		Gender: 🔲 Male	Race:	☐ White			
		☐ Fernal	e	☐ Black			
				🗆 Asian o	r Pacific Islander		
Driver's License #:	<u></u>			☐ America	an Indian or Alaskan Native		
		,		Unknov	vn/Other		
티	ease list all of yo	ur children who are	enrolled in La	ke Orion C	ommunity Schools.		
Student's	Name		School Building		Grade/Class		
Student's	Name		School Building		Grade/Class	Grade/Class	
Student's	Name		School Buildi	ng	Grade/Class	3	
Student's	Name	<del></del>	School Buildi	ng	Grade/Class	3	
signing, i • I will relea	f appropriate, th	e District's Network	and Internet A	Access Agre	n duty as a volunteer incle ement Forms. e an injury as a result of r		
	Signati	··			Date		