



Form IJOA-E3
Parent Request for Permission to Transport a
Student TO or FROM a Student Field Trip or Excursion

In compliance with LCPS Policy and Regulation IJOA: Field Trips and Excursions, any parent or guardian who wishes to transport his/her child TO or FROM a school-sponsored student field trip or excursion must complete this form and submit it to the Principal at least five days prior to the field trip or excursion.

Student's Name: _____

Student ID Number: _____ Age: _____ Grade: _____ Student's School: _____

I, _____, hereby request permission from my child's Principal to transport my
(Printed name of parent) son/daughter in connection with the following student field trip or excursion:

Name of field trip/excursion: _____ Date of trip: _____

Location of field trip/excursion: _____

This request is to transport my child:

- TO the field trip or excursion site. FROM the field trip or excursion site.

I understand that students are required to ride in school-sponsored transportation for all school-sponsored field trips and excursions. However, I request to transport my son/daughter because of the following extenuating circumstances/reasons: (Explain in detail.)

Read each section and check after reading:

- I understand that if I am transporting my child to the field trip or excursion site, I am responsible for meeting any time schedule for his/her participation.
I further understand that I hereby accept all responsibility related to the transportation of my son/daughter related to the above-listed student activity. Additionally, I, hereby release and waive, and further agree to indemnify, hold harmless or reimburse the Las Cruces Public Schools Board of Education, its individual members, agents, employees and representatives thereof, as well as trip supervisors or activity trip sponsor(s), from and against, any claim which I, any other parent or guardian, the student, or any other person, firm or corporation may have or claim to have, known or unknown, directly or indirectly, for any loses, damages, or injuries arising out of, during or in connection with my transportation of the student for participation in the trip and related activities.
I affirm that I have authority to transport the student and to accept full responsibility for such transportation and that my authority is consistent with my status as a parent or legal guardian of the student, and my authority does not violate any custody or guardianship order of a court of competent jurisdiction.
I fully understand that permission to privately transport my son/daughter does not authorize me to transport any other student, which is strictly prohibited by LCPS policy.

Parent/Guardian:

Printed Name

Signature

Address

(Day phone number)

(Cell phone number)

Date signed: _____

LCPS APPROVAL / DISAPPROVAL OF REQUEST:

Approved Disapproved
Principal Date