



EDUCATION RESERVATION REQUEST FORM



| SECTION 1: Contact Information (Required) |
|---|
| School/Organization Name |
| Name of Requester |
| Title/Position (optional) |
| School Contact Email Address |
| School Contact Phone Number |
| School Mailing Address |
| City |
| State |
| Zip Code |
| Does anyone in your classroom need any accommodations? Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Describe need: |

| SECTION 2: Group Details – Park Visit/ Field Trip |
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| Day of Event – Name of Primary Contact |
| Title/Position |
| Primary Contact School Email Address |
| Primary Contact Phone Number |
| Program or Subject Requested/Self-Guided |

| | | |
|--------------------------|------------------------------|------------------------|
| Grade | Number of Students | Number of Chaperones |
| Preferred Date of Visit | Preferred Program Start Time | Alternative Date(s) |
| Anticipated Arrival Time | Anticipated Departure Time | Mode of Transportation |

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| <p>Disclaimer: A park representative will follow-up to confirm group details once this request has been received and reviewed.</p> |
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| SECTION 3: Group Details – Ranger-in-classroom Program |
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| Day of Event – Name of Primary Contact |
| Title/Position |
| Primary Contact School Email Address |
| Primary Contact Phone Number |
| Program or Subject Requested |
| How much time will the ranger have to conduct the program? |

| | | |
|---------------------------|------------------------------|----------------------|
| Grade | Number of Students | Number of Chaperones |
| Preferred Date of Program | Preferred Program Start Time | Alternative Date(s) |

Disclaimer: A park representative will follow-up to confirm group details once this request has been received and reviewed.

| SECTION 4: Group Details – Virtual/Distance Learning Program |
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| Day of Event – Name of Primary Contact |
| Title/Position |
| Primary Contact School Email Address |
| Primary Contact Phone Number |
| Program or Subject Requested |

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|------------------------------|------------------------|
| Grade | Number of Students |
| Preferred Date of Program | Alternative Date(s) |
| Preferred Program Start Time | Time Zone of Classroom |

How much time will the ranger have to conduct the program?

Virtual and/or Distance Learning can vary depending on the technical capabilities of the park and the school. In order to find appropriate accommodations for your learning experience, here are some categories to be prepared to discuss with the park:

- (1) Internet Access
- (2) Phone Access (speaker phone or conference line)
- (3) Mobile or digital video conferencing capabilities
- (4) Firewall
- (5) Hardware and Software Capabilities
- (6) Classroom pre-work or assignments

SECTION 5: Academic Fee Waiver

Only groups of students 16 years of age or older visiting a park that collects entrance fees require an Academic Fee Waiver.

CERTIFICATION

Academic fee waivers are not granted automatically. Applicant groups must show they qualify for the waiver. There are three criteria the group must meet to qualify for an academic fee waiver: eligibility, relevance of park resources or facilities to academic program, and academic purpose. Details of these qualifications are listed below. If your institution and purpose meet these criteria, submit the following form to the above address.

Criteria One – Eligibility: Describe below and/or attach current official recognition or accreditation as an educational institution by a federal, state, or local government or other documentation attesting to educational status, such as an accreditation letter, educational tax-exempt letter.

Criteria Two – Educational Purpose: Verify how this visit supports a specific curriculum for which academic credit is offered. For example, attach a course syllabus/description, course catalog, lesson plan, letter detailing the educational purpose, etc., and/or describe below.

Criteria Three – Relevance of Park Resources or Facilities: Identify the pertinent park resources and/or facilities and detail how they are relevant to support the educational purpose of the visit (attach letter or describe below):

Acknowledgement: I understand the Recreation Fee Authority (16 USC 6802 Sections 3 a and b) allows for fee waivers only for bona fide educational and/or scientific institutions that are using the park for educational purposes. I hereby certify that the above detailed trip meets these requirements and therefore request that fees be waived. Current official documentation of recognition of affiliation as an educational institution by a Federal, State or local government entity, or other evidence attesting to educational status is attached (e. g accreditation letter, educational tax- exempt letter). It is insufficient to merely state or imply this on official letterhead.

| | |
|----------------------|-------|
| Authorized Name | Title |
| Authorized Signature | Date |

NOTICES

PRIVACY ACT STATEMENT

Authority: Public Law 114 – 289 National Park Service Centennial Act and 54 U.S.C. 100701 Protection, interpretation, and research in System.

Purpose: To administer education programs for education audiences including but not limited to school groups, scouting groups, extracurricular groups, and home school groups.

Routine Uses: To effectively manage requests for education received by the NPS, the Education Reservation Request Form is used to collect basic education reservation information to facilitate operational aspects of scheduling groups for park education programs, including in-park education programs, ranger in classroom programs, and/or online distance learning programs.

Disclosure: Voluntary, however, failure to provide the requested information may impede the ability to grant your education reservation request.

PAPERWORK REDUCTION ACT STATEMENT

We are collecting this information subject to the Paperwork Reduction Act (44 U.S.C. 3501) to provide park managers and educators the information needed to schedule and conduct education program activities. All applicable parts of the form must be completed in order for your request to be considered. You are not required to respond to this or any other Federal agency-sponsored information collection unless it displays a currently valid OMB control number. OMB has approved this collection of information and assigned control number 1024-0288

ESTIMATED BURDEN STATEMENT

Public reporting for this collection of information is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Information Collection Clearance Officer, National Park Service, 1201 Oakridge Drive, Fort Collins, CO 80525. Do not send your completed form to this address.