

SCHOOL DISTRICT NO. 85 (*Vancouver Island North*)
APPLICATION FOR FIELD, ATHLETIC OR CULTURAL ACTIVITY

Applicant: _____ School: _____ Application Date: _____

Nature of Activity and/or Associated School Courses: _____

Destination of activity: _____

Description of group: _____

Number of grade level(s) of students: _____

Date/duration and ETA home: _____

Method of Travel: _____

Transportation home from school upon return: _____

Your signature below indicates that District Policies PM2-100 (Field Trips) and PM6-1000 (Transportation) are being followed and that no student trip will be taken without ensuring the following items are met:

- The supervisor in charge of the field trip, consistent with policy, is a School District employee or responsible school community member.
- Parents/students have been fully informed of the particulars of the activity including purpose; destination; supervision; transportation, accommodation and eating arrangements; date and time of arrival/return.
- The School Consent and Waiver form or the School Sponsored Trip Consent form has been filled out by parents.
- The transportation being used is consistent with provincial legislation and school district policy. (*NOTE: A Class 4 Driver's License is required to drive a vehicle with a capacity of 10 passengers or more, including the driver.*)
- Transportation arrangements have been confirmed.
- Behaviour/drug/ alcohol policies have been fully explained to all participating students.
- Should behaviour problems occur, details of premature return travel have been explained to students.
- Adequate precautions are in place to cope with the nature of the activity.
- Availability of any required medical/safety equipment required has been confirmed.
- Participation of chaperones has been confirmed.
- Appropriate learning activities have been arranged for students not participating in this activity.
- An information meeting has taken place for parents of students involved in trips beyond 5 nights and/or for a High Risk Field Trip.

FUNDING - If not covered by the School Field Trip Account: (*Please indicate amounts.*)

To be borne by students: _____ To be raised by students: _____ N/A _____

Details of any fundraising activities to be undertaken: _____

TELEPHONE contact numbers while away: (*Please attach a separate sheet if the itinerary is lengthy.*)

Location	Phone Number	Date

Contact at school (*if not the Principal/Vice-Principal*): _____ Home Phone: _____

APPROVAL for this activity is sought as indicated below:

- In district
 Out of district
 Out of province **
 Two nights or more
 Five nights or more *
 Activity Potentially Involving More than Routine/Normal Risks/Hazards *

* (*Board approval - 35 days prior to activity*) ** (*Board approval - three months prior to fundraising/planning activities*)

 (*Applicant's Signature*)

 (*Principal/Vice-Principal's Signature*)

SUPERINTENDENT'S or ASSISTANT SUPERINTENDENT'S RESPONSE:

Approval for this request has been: Granted _____ Denied _____

Comments:

 (*Signature*)

 (*Date*)

**REPORT TO PRINCIPAL
ON
FIELD, ATHLETIC, OR CULTURAL ACTIVITY**

(to be completed by teacher-coordinator upon completion of activity)

This activity was: successful not successful

1. The trip was uneventful and I am not aware of any misdemeanours that I need to bring to your attention.

2. The trip went along as planned except for the incidents that are outlined below:

3. These incidents:

 have been dealt with adequately

 are being brought to your attention for your action.

4. Some highlights of the trip were:

Date

Signature of Teacher/Coordinator