



Horizon School Division
Policy HICA Attachment D: *Field Trip Proposal Form*
Superintendent Approved

School:		Individual requesting approval:	
Low/Green or Moderate/Amber Activity (circle one)	Phone:	Email:	
Destination/Activity:	Departure Date:	Return Date:	
	Departure Time:	Return Time:	
Grade Level (Please Circle): ECS 1 2 3 4 5 6 7 8 9 10 11 12	# of Male Students:		
	# of Female Students		
<input type="checkbox"/> This form covers a series of co-curricular/extra-curricular activities in the school year (See Attached Schedule)			
Names of Supervisors (Please Print):		Are they Staff/Volunteer/Service Provider?	Gender: M/F
Teacher in Charge:			
Other Supervisor:			
Other Supervisor:			
Other Supervisor:			
Total Number of Supervisors:			
Name of Service Provider (SP): (If Applicable)		SP Contact Person:	SP Phone:
Method of Transportation (check all that apply): <input type="checkbox"/> School-Owned Bus/Van <input type="checkbox"/> Rental Van/Charter Bus Company: <input type="checkbox"/> Service Provider Company: <input type="checkbox"/> Plane Airline and Flight #'s: <input type="checkbox"/> Volunteer Driver (Staff/Other/Supervisor) <input type="checkbox"/> Other: _____		Attachments Included (Check off as applicable): <input type="checkbox"/> Detailed Itinerary (required) <input type="checkbox"/> Parent Correspondence including student responsibilities (required) <input type="checkbox"/> Field Trip Approval Checklist (part of attachment D – required) <input type="checkbox"/> Teacher/Leader Qualifications Assessment Form (attachment E: Required for moderate risk/Amber activities) <input type="checkbox"/> Parent/Guardian Consent/Risk Acknowledgement Form (attachment F – required) <input type="checkbox"/> Volunteer Registration Form (Policy GFA) <input type="checkbox"/> Volunteer Reference Check Form (Policy GFA) <input type="checkbox"/> Volunteer Consent/Risk Acknowledgement Form (attachment G) <input type="checkbox"/> Volunteer Medical Information Form (attachment H) <input type="checkbox"/> Volunteer Automobile and/or Driver Authorization Form (attachment B policy EEACAA) <input type="checkbox"/> Parent/Guardian Responsibility of Student Transportation for School Sponsored Events (attachment A policy EEACAA) <input type="checkbox"/> International Field Planning Guide (attachment I)	
Estimated Cost of Trip:		Source(s) of Funding:	
Equal access for all students assured: <input type="checkbox"/> Yes <input type="checkbox"/> No			
<u>Educational Value and/or Purpose:</u>			
1. What is the purpose and what are the educational/recreational objectives of the trip?			
2. How have the students been prepared re: knowledge, skills, and attitudes for the trip?			
3. What activity(ies) will occur during the trip (include on attached trip plan or itinerary)?			
4. What follow-up activities will occur?			
<u>Parent Information:</u>			
<input type="checkbox"/> Parents/Guardians have been informed in writing of all required information about off-site activities as per section 9.1 of Policy HICA (check off to confirm and attach communication)			
<u>Safety Guidelines</u> (NOTE: This is for Athletics or moderate risk activity-based events such as Skiing)			
<input type="checkbox"/> I have reviewed and applied relevant board policies and the Safety Guidelines for Physical Activity in Alberta Schools (Attachment L) – (check off to confirm)			

Insurance

Flight/travel cancellation Yes No NA Company _____

Trip cancellation Yes No NA Company _____

Medical services Yes No NA Company _____

Safety Plan (for Moderate/Amber activities only)

Briefly Describe the Assessment and Preparation that has occurred regarding the following, as appropriate:

1. Hazards or risks associated with activity:

2. Equipment or safety precautions taken:

3. Contingency Plan(s):

Supervision Plan

1. Identify the roles and responsibilities of supervisors (e.g., large and/or small group supervision, group management, discipline, night checks, activity instruction, other):

2. When and how will volunteers be briefed regarding their roles, responsibilities, and expectations:

Emergency Plan (If Needed):

1. What is the level of First Aid training within the group? (i.e., number of people with each relevant certification, who is the primary First Aider)

2. First Aid, survival and repair kits (as appropriate) are stocked and accessible: Yes NA

3. What steps will be followed if a participant is ill or has a non-life threatening injury?

4. How will emergency services (police, fire, ambulance, search and rescue) be activated if needed in the area?

Name of Teacher in charge (please print)	Date (year/month/day	Signature
Name of Principal in charge (please print)	Date (year/month/day	Signature
Superintendent approval (please print)	Date (year/month/day	Signature

Important Notes:

1. The personal information contained on this form is collected under the authority of the School Act and the Freedom of Information and Protection of Privacy Act for the purpose of participating on school trips. If you have any questions about this form, please contact you school principal.
2. The Board reserves the right to cancel any off-site activity at any time.
3. Superintendent approval in principle must be acquired prior to student and parent communication
4. Prior to submitting this application form to the principal, the teacher in charge will have read through Policy HICA (Off-Site Activities) and realize the extra responsibilities associated with taking students off-site.
5. Prior to signing this application, the principal will review the application form in light of Policy HICA (Off-Site Activities) to ensure that the teacher in charge is aware of its requirements.



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The following checklist MUST be filled in by the principal in consultation with the staff member responsible for the field trip.
 This form MUST be attached to the Field Trip Proposal Form

✓ = Met
 X = Not Met
 ? = Need More Information

Check off if criteria are met

- Administrative process respected (e.g., proposal submitted to appropriate administrator in time to be considered)
- Field trip accessibility/eligibility policy addressed (e.g., equal access; voluntary participation, if appropriate; alternative activity for non-participants)
- Educational value of the trip is evident (e.g., goals and student learning outcomes stated)
- Trip is appropriate for the students (e.g., age/grade, preparation, and follow-up)
- Duration of the trip is appropriate and can be accommodated in the school calendar
- Destination or route adequately assessed (through pre-visit or other data collection) and appears appropriate
- Itinerary and activities are outlined and fit the objectives
- The group appears adequately prepared for trip (e.g., knowledge, skills, attitudes, fitness, clothing, equipment)
- Information to be given parents is appropriate for the type/duration of trip
- Parent information meeting date is planned, if holding one is appropriate for the trip
- Parental consents to be collected (e.g., consent to attend, acknowledgement of risk, consent to secure medical treatment)
- Relevant student health and medical information to be secured from parents
- Additional insurance needs addressed, if relevant
- Budget and financial arrangements appropriate
- Transportation arrangements acceptable
- Plan in place to seek appropriate parental consents if private vehicles are to be used
- Number and gender (s) of supervisors and supervision plan are appropriate for group, activities and sites/areas
- Plan to ensure all participants are clear re: behavioral expectations and consequences
- If overnighting, accommodations arrangements are acceptable, (e.g., hygiene, potable waters, food preparation)
- Teacher/leader is competent to instruct/lead the particular group in the identified activity(ies) and environment(s)
- Plan in place to brief supervisors re: trip purpose, logistics, roles/responsibilities, safety plan, emergency plan, etc.
- Safety plan is appropriate (i.e., procedures for managing the key inherent risks of the activities, environments and participants)
- Emergency plan is in place to deal with injured/ill/lost/stranded participant(s) (e.g., training, kits, communications equipment, EMS access, back-up transportation)
- Confirmation of the presence of appropriate alternative contingency plan(s)
- Destination contact and phone number (e.g., outdoor centre, camp, local authority(ies))
- List of documents teacher will carry (e.g., trip plan, permits, passenger manifestos, medical conditions and emergency contacts of participants)
- Office to receive copy of finalized trip plan, signed parental consent forms, passenger manifestos, and names of no-shows
- Other relevant information unique to the particular trip. Specify:

Comments:

Principal Signature: _____