

**Administrative Procedure 260  
Form 260-6**

**Field Trip/Excursion Authorization Form**

School: \_\_\_\_\_

Date(s) of Trip: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Destination: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Class: \_\_\_\_\_ Teacher: \_\_\_\_\_

Number of Students Going: \_\_\_\_\_

Supervisor(s) (Male & female supervisors required for co-educational overnight field trips/excursions)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Method of Transportation: \_\_\_\_\_

\_\_\_\_\_

Driver(s): \_\_\_\_\_

Purpose and Objectives of Trip: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How does this complement and relate to the classroom program: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

REGULAR SCHOOL PROGRAM – please provide information related to: A) program arrangements for students who choose to stay at school and not participate in this field trip/excursion; and B) arrangements for students who miss regular classes due to their participation in this field trip/excursion.

A: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SAFETY PROCEDURES – please provide information related to: first aid and medical facilities en route and on-site; medical training/qualifications of supervisors; awareness of student health information and, if need be, instructions regarding the administration of medication(s) to students; appropriate medical insurance, if the trip/excursion is out-of-province.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

FINANCES – please provide information related to: the cost of the field trip/excursion (transportation, accommodations, meals, registration/entrance fees, rentals, etc); revenue sources (student levy, fundraising activities, Division support, etc.).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TRIP ITINERARY (if applicable) – please attach a copy.**

Once this field trip/excursion is approved, the parents will sign and return the Informed Consent/Permission Forms to the school.

I, \_\_\_\_\_, (teacher's name) have read Administrative Procedure Form 'Field Trips and Excursions' and I understand and have complied with the requirements as outlined.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Teacher Signature

## TIMELINES

The timelines shown below, for the consideration, review and approval of Field Trip Requests, shall be strictly enforced.

### Preliminary Approval Timelines:

Category 1.0	Day trip – low to moderate risk	3 days
Category 2.0 (a)	Day trip – high risk	3 weeks
Category 2.0 (b)	Overnight – low to moderate risk	3 months
Category 2.0 (c)	Overnight – high risk	3 months
Category 3.0	National	3 months
Category 4.0	International	6 months ( <i>written proposal</i> )

### Final Approval Timelines:

Category 1.0	Day trip – low to moderate risk	2 days
Category 2.0 (a)	Day trip – high risk	2 weeks
Category 2.0 (b)	Overnight – low to moderate risk	2 months
Category 2.0 (c)	Overnight – high risk	2 months
Category 3.0	National	2 months
Category 4.0	International	4 months

According to the Category of the Field Trip or Excursion you are planning, please present the appropriate completed Form to Principal according to schedules outlined below.

**Category 1.0 or 2.0 b**

Principal's Preliminary approval for Category 1.0 or 2.0(b) is hereby granted pending receipt of the following information:

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Principal's **Preliminary Approval** - Category 1.0 and 2.0(b)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Principal's **Final Approval** - Category 1.0 and 2.0(b)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Category 2.0 a, or 2.0 c, Category 3.0, or Category 4.0**

Principal's Preliminary approval for Category 2.0 a, or 2.0 c, Category 3.0 or Category 4.0 is hereby granted pending receipt of the following information:

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Principal's **Preliminary Approval** - Category 2.0 a, or 2.0 c, Category 3.0 or Category 4.0

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Principal's **Final Approval** - Category 2.0 a, or 2.0 c, Category 3.0 or Category 4.0

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Category 2.0 a, or 2.0 c, Category 3.0, or Category 4.0**

Superintendent's Preliminary approval for Category 2.0 a, or 2.0 c, Category 3.0, or Category 4.0 is hereby granted pending review with Principal:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Superintendent's **Final approval** for Category 2.0 a, or 2.0 c, Category 3.0, or Category 4.0 is hereby granted *based upon receipt of the Form FIELD TRIP /EXCURSION PLANNING CHECKLIST*, which has been reviewed and approved by the Principal or designate.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Distribution: 1 copy – Teacher  
1 copy – Principal or Designate  
1 copy – Superintendent