



Northern Gateway Public Schools

Lead Teacher's Off-Site Activities Approval Form

LEAD TEACHER: _____ DATE: _____

SECTION A

Grade(s), Class or Team:			
Title of Activity:		Date(s) of Trip:	
Location of Activity:		Time of Departure:	Time of Return:
Description of Activity:			
Educational Purpose of Trip:			
Method of Transportation:	School Bus <input type="checkbox"/>	School or Division Van <input type="checkbox"/>	Private Vehicle <input type="checkbox"/>
	Walking <input type="checkbox"/>	Other:	
Costs to students:			
Transportation: \$ _____ Activity costs: \$ _____ Equipment Rental \$ _____ Other: \$ _____			
Total: \$ _____			
Supervisor/student ratio: _____ : _____		Supervisor's Name(s):	
		Supervisor Qualifications:	
Description of specialized clothing or equipment required:		The Risk Assessment	
Safety Elements/Concerns: _____ _____ _____ _____			
Has the Lead Teacher previewed the proposed site? Yes <input type="checkbox"/> No <input type="checkbox"/>		Activities planned for students unable to participate in the Field Trip:	

Safety Assessment/ Risk Review

- Is this activity listed as a “Prohibited” or “High Risk” Activity as outlined in Administrative Procedure 260? Yes No
- The activity is suitable to the age, developmental level and physical condition of the participants. Yes No
- Participants have been progressively taught and coached to perform the activity properly and to avoid the dangers inherent in the activity. Yes No
- Day book and lesson plans indicate progressive teaching of skills. Yes No
- The equipment for the activity is adequate and suitably arranged. Yes No N/A
- The activity is adequately supervised for the risk involved. Yes No
- The activity is consistent with the standards in Safety Guidelines for Physical Activity in Alberta Schools, (if applicable) and is in compliance with Northern Gateway Schools policy. Yes No

Approval to Proceed With Planning

Principal approval to proceed: _____ **Date:** _____

Superintendent approval to proceed: _____ **Date:** _____

Superintendent Approval: (Only for trips requiring overnight or out of province travel, or special circumstances)

Lead Teacher Planning Guide for Off-Site Activities

SECTION B

Upon completion of Section B, please return this form to the Principal along with an attached itinerary.

- Transportation organized and confirmed Yes No
- Driver(s) Name(s):
 - 1. Volunteer Driver(s) Approved, form 418-2 Yes No
 - 2. If Private Vehicles, parental consent form 418-1 Yes No
- Itinerary (Information Package) established and sent home Yes No
- Lodging booked Yes No N/A
- Medical facilities established Yes No
- Emergency numbers secured Yes No
- Costs established and collected Yes No
- Appropriaate insurances in place Yes No
- Equipment list established Yes No
- First aid kit Yes No
- Special provisions made for high risk activities Yes No N/A
 - 1. Teacher credentialing and/or experience provided as required as per section 6(d) (Administrative Guidelines) for high risk activities Yes No N/A
- Field trip participant list created:
 - Student list Yes No
 - Supervisor list Yes No
- Telephone number list created Yes No

Note: A negative determination in any section of this planning guide is grounds for cancellation or postponement of the activity.

Principal Acknowledgement

I acknowledge that I have read the above, and through discussion with the Lead Teacher, indicate that, in my opinion, appropriate steps have been taken to ensure the safety of all students involved in this field trip.

Principal's Signature: _____ **Date:** _____