



Field Trip Application

Category: Please mark with an "X" beside the field trip level

Principal Approval Required: Level 1 Level 2 Level 3 Superintendent Approval Required: Level 4 Level 5

Details of the Trip:

School: _____
Group of Students/Class: _____
Destination: _____

Teacher Contact: _____
Cell #/Sat. Phone: _____

Description of Activities: _____
Inherent Risks of Participating : _____

In-Valley Requests: Minimum (1) week notice prior to commencement of the trip
Out-of-Valley Requests: Minimum (1) month notice prior to commencement of the trip

Bus Request:

Support Vehicle Being Taken

No. of Students: _____ Departure Date: _____ Return Date: _____
No. of Chaperones: _____ Departure Time: _____ Return Pickup Time: _____

Private Vehicle:

No. of Students: _____ Departure Date: _____ Return Date: _____
No. of Chaperones: _____ Departure Time: _____ Return Time: _____
No. of Vehicles Being Used: _____

Chaperones:

Name: _____ Chaperone Previously? CR Check Submitted:
Name: _____ Chaperone Previously? CR Check Submitted:
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Preparation Checklist: Please ensure all of the following requirements have been included/completed with application:

- Parent Permission Forms
- Basic Travel Itinerary Form for Parents
- List of Students (in MS Excel)
- List of Students w/Medical Alert
- Medical Alert Plan (if required)
- Budget Form Included
- Notification of other Teachers
- Information Assembled in Trip Binder
- CR Checks included
- Copies of Vehicle / boat liability insurances

School Level Sign-off:

This field trip is endorsed and filed with the understanding that details will be addressed as provided in the regulations and guidelines. The booking of TTOC's is the staff member's responsibility and bussing is the principal's responsibility.

Teacher: _____

Date: _____

Principal: _____

Date: _____

District Sign-Off: Levels 4 and 5 Field Trips Only – please refer to the guidelines for District Field Trips

The following signature indicates an approved application:

Superintendent's or Designator's signature: _____ Date: _____

Please complete for Career Life Programs Field Trips:

Teacher: _____ School: _____

Grade: _____ Subject: _____

1. Briefly describe the educational preparation that has taken place in relation to this field trip.

2. What career awareness and/or exploration activities will your students be participating in?

3. Briefly describe the planned follow-up activity that relates to the field trip experience.

4. Have you given two week's notice? Teacher Signature: _____

Explanation of Trip Levels:

Level 1 (Regional, Low Risk Day Trips)

Examples: Parks, concerts, festivals, hikes

- Take place within the Bella Coola Valley

Level 2 (Provincial, Overnight Trips)

Examples: Overnight sports tournaments, or games, overnight field trips

- May be more than one day in duration

Level 3 (Provincial, Medium-Risk Trips)

Examples: Skating, snowshoeing, skiing (downhill and cross-country)

- May be more than one day in duration

Level 4 (Provincial, Outdoor Adventure)

Examples: Extensive hiking, canoeing, rock climbing, camping

- May be more than one day in duration

Level 5 (Out of Province)

Guidelines: Levels 4 and 5 Field Trips only

To receive preliminary approval to continue planning a Level 4 or 5 field trip, staff should submit a copy of the field trip application form and the parent information letter to the school's principal.

The following conditions must be met:

1. Inherent risks are attached to the Parent Permission Form
2. The budget for the trip has been presented to the parents of involved students prior to submission to the principal.
3. Any special requirements in order to participate (i.e. behavior, academic, physical endurance standards) are attached to the Parent Permission Form.
4. Parent has been consulted well in advance regarding this trip and is supportive of this education activity.
5. Itinerary is outlined on or with Parent Permission Form.
6. Learning outcomes to be achieved are outlined on or with Parent Permission Form.
7. Safety precautions to be taken are listed.
8. Names of participating students are attached.
9. Arrangements have been made so that students not participating may achieve these learning outcomes through alternate means.

Application for Level 4 field trips must be submitted to the principal 30 days prior to the commencement of the trip.

Application for Level 5 field trips must be submitted to the principal 60 days prior to the commencement of the trip.

For Parents



Parent Permission Form

Trip Level: _____

This permission slip form must be returned for your child's participation.

Details of the Trip:

Class/Group: _____ Teacher Contact: _____
Contact # for Trip: _____ Return form by: _____
Additional Chaperone(s): _____
Destination: _____

Description of Activities: _____
Inherent Risks of Participating : _____

Departure Date: _____ Return Date: _____
Departure Time: _____ Return Pickup Time: _____
Traveling by: _____ Estimated Arrival Time Back at School: _____

Chaperones needed: yes Student Needs to bring a lunch: yes
Fees to be paid: yes Amount: \$ _____

Fair Notice Statement:

I have read and am informed about the proposed trip. I understand my son/daughter still needs to be meeting both the academic and behavior requirements as set out by school policy and if not meeting will not be permitted to participate. Both my son/daughter and I understand that Board policies 310, 450, 460, 540, 620, 716 apply on all trips. The use of alcohol, drugs, tobacco products and/or inappropriate student conduct may result in suspension from school. Students engaging in these behaviors will be sent home at their families' expense.

Please cut and return lower portion



Field Trip Location:

Field Trip Date:

Student Information:

Name: _____
Care Card No. _____
Medical Conditions: _____

Parent Signature

Parent Name (print): _____ Parent Signature: _____
Telephone: _____ Cell No. _____
Date: _____ Willing to Chaperone: yes

For Office Use Only Fees Received: Staff Member Initial: _____

TRAVEL ITINERARY – PARENT COPY (Please keep for your peace of mind)

Day: _____ **Date:** _____

Traveling from/to: _____ **to** _____

Staying at: _____ **Contact No.** _____

Breakfast Location (if applicable): _____ **Time** (approx.): _____

Lunch Location (if applicable): _____ **Time** (approx.): _____

Dinner Location (if applicable): _____ **Time** (approx.): _____

Game Location (if applicable): _____ **Time:** _____

Evening Activity(ies): _____

Time (approx.): _____ **Cost to Student:** (if applicable): _____

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Lights Out: _____

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EXPLANATION OF TRIP LEVELS

LEVEL 1 (REGIONAL, LOW RISK DAY TRIPS)

Examples: parks, concerts, festivals, hikes

- Take place within the Bella Coola Valley

LEVEL 2 (PROVINCIAL, OVERNIGHT TRIPS)

Examples: overnight sports tournaments, or games, overnight field trips

- May be more than one day in duration

LEVEL 3 (PROVINCIAL, MEDIUM-RISK TRIPS)

Examples: skating, snowshoeing, skiing (downhill and cross-country)

- May be of more than one day in duration

LEVEL 4 (PROVINCIAL, OUTDOOR ADVENTURE)

Examples: Extensive hiking, canoeing, rock climbing, camping

- May be more than one day in duration

LEVEL 5 (OUT OF PROVINCE)