



## FIELD TRIP, INSTRUCTIONAL TOURS, AND REMOTE FIELD TRIPS

**APPLICATION FORM FOR POLICY 338** 

## **INSTRUCTIONS**

- 1. Become familiar with Policy #338 FIELD TRIPS, INSTRUCTIONAL TOURS, AND REMOTE FIELD TRIPS and its procedures before completing this form.
- 2. Drivers of vehicles must ensure that children in their cars, and under 9 years of age, unless they have reached a height of 145 cm. (4'9") tall, use booster seats.
- 3. The sponsor teacher(s) should complete both sides of this form and submit it to the Principal or Superintendent prior to travel.
- 4. The principal shall ensure that all aspects of Policy #338 are complied with.
- 5. For overnight trips, approval of the Superintendent must be obtained prior to travel.

## **DESCRIPTION OF TRIP**

Please list the following: Who, Number of students, Grade level, Where, Reason for trip.	
	Many average variable (average average)
LENGTH OF TRIP ONE WAY CHECK ONE.	MODE OF TRANSPORTATION (CHECK ONE):  ☐ Private or rented vehicle\
Under 100 km	☐ School bus or chartered bus
□ 100 − 300 km	☐ Taxi, city transit or common carrier
□ Over 300 km	= rain, stey transit or common currer
	SCHOOLS MAY NOT USE PASSENGER VANS TO TRANSPORT STUDENTS
OTHER TRANSPORTATION DETAILS (IF REQUIRED):	
NAME(S) OF VOLUNTEER DRIVERS (if applicable):	<ul> <li>□ The vehicle and license requirements are all in compliance with BC regulations</li> <li>□ All volunteer driver forms are on file or attached to this form.</li> </ul>
DEPARTURE FROM:	RETURN TO:
DATE:	DATE:
DAIE;	DAIE.
TIME:	TIME:

ACCOMMODATION DETAILS IF OVERNIGHT (NAME, ADDRESS, PHONE NUMBER):	Further details (if required):
NAME(S) OF TEACHER(S):	NAME(S) OF OTHER ADULTS ON THE TRIP:
CRIMINAL RECORD CHECK FORMS  ☐ All 1 criminal reference check forms are complete	ed and on file for adults on overnight trips.
	endent or his/her designate and therefore attached is a mation on funding sources, review of safety hazards applicable, commercial tour information.
*Note: This form may be used for multiple in-tow.  CERTIFICATION BY TEACHER(S):  I (We) are aware of the requirements of Policy # will be conducted accordingly.	n trips if a schedule of events is attached.  #338 and its regulations and certify that this trip
TEACHER	DATE (YYYY/MM/DD)
TEACHER	DATE (YYYY/MM/DD)
APPROVAL	
PRINCIPAL	DATE (YYYY/MM/DD)
SUPERINTENDENT (IF REQUIRED)	DATE (YYYY/MM/DD)
	FINAL APPROVAL DATE