

FORM G

REQUEST FOR PRINCIPAL/SUPERINTENDENT AND/OR DIRECTOR APPROVAL OVERNIGHT TRIPS AND/OR EXTENDED EXCURSIONS

Please complete and submit to the Principal at least TWO (2) MONTHS (Within Canada), THREE (3) MONTHS (Out of Canada) prior to the date of the proposed excursion and January 30th OF THE PREVIOUS SCHOOL YEAR (Extended Excursions). One copy will be returned to the teacher and another retained by the principal as well as the Superintendent.

Ple	ease indicate excursion	າ type:				
	Overnight in province – Overnight out of province Extended Excursions (r signatures	ce – requires Principa	I, Superintendent and	Director signatu		
Sc	hool:					
Sta	aff Organizer(s):					
Grade(s) Involved:			Total No. o	Total No. of Students:		
Pr	oposed Dates:					
Destination:						
Address:						
Telephone (+ area code):						
Student/Supervisor Ratio:						
Purpose of Excursion:						
Pre-Excursion Activities:						
Fo	llow-up Activities:					
FC	RM OF TRANSPORTA	TION:				
Co	ordinating Travel Com	pany:				
Name of Transportation Co.:			Telepho	Telephone No.:		
De	parture from School:	Date	Time:	a.m	p.m.	
Re	turn to School:	Date	Time:	a.m	p.m.	
	EXCUR	SION COST AND AN	NALYSIS Form Must I	be Attached		
TOTAL COST:			Cost for St	Cost for Student:		
			Yes	No		

APPROVALS:						
Staff Organizer (Print Name):						
Staff Organizer Signature:	Date:					
Principal Signature:	Date:					
Superintendent Signature:	Date:					
DIRECTOR APPROVAL: For out of province, country, or extended excursions (7 or more days)						
Director Signature:	Date:					

Policy Document: School Excursions S-2018-04-1