



# Huron-Superior Catholic

## DISTRICT SCHOOL BOARD

### FIELD TRIPS – FORM C

#### APPLICATION FOR APPROVAL by SCHOOL SUPERINTENDENT

#### OUT-OF-TOWN DAY FIELD TRIP/VISIT

SCHOOL: \_\_\_\_\_

NAME OF TEACHER: \_\_\_\_\_ GRADE: \_\_\_\_\_

requests authorization to take his/her class to \_\_\_\_\_  
(place or area)

Date of Departure: \_\_\_\_\_

Date of Return: \_\_\_\_\_

Number of Students: \_\_\_\_\_ Number of Staff: \_\_\_\_\_ Number of Adults: \_\_\_\_\_  
(At least 1 required)

*Note: Both male and female chaperones should accompany overnight trips with mixed student groups.*

Means of Transportation: \_\_\_\_\_  
(Under no circumstances are students to drive other students.)

Special provisions to provide for Universal Access: YES NO NOT REQUIRED

Note: The Principal confirms that all "Volunteers" have had a Criminal Reference Check and that all students have out of province/country medical insurance for travel outside the province/country. The principal also confirms that all staff/chaperones are aware of Policy 5003 Field Trips and its accompanying Procedural Guidelines.

\_\_\_\_\_  
(Signature of Principal)

\_\_\_\_\_  
(Date)

#### AUTHORIZATION

This OUT OF TOWN DAY FIELD TRIP/VISIT is approved.

\_\_\_\_\_  
(Signature of School Superintendent)

\_\_\_\_\_  
(Date)

Distribution: The Principal will sign the form and send it to the School Superintendent.  
Once approved, a copy will be sent to the School Principal