Westwind SCHOOL DIVISION

FORM 261-1

COCURRICULAR ACTIVITIES & TRAVEL WITHIN ALBERTA FORM

Please complete this form by selecting ***File>Make a Copy***
Submit completed forms to the principal for day trips and the superintendent for any overnight trips within the timelines outlined in AP261. Please ensure transportation authorizations are submitted separately using the Bus Authorization Form.

TRIP DETAILS

School Name:	Teacher in Charge:	
Travel Dates:		
Student Grade Levels:		
Destination:		
# of Student Participants:	Male:	Female:
# of Adult Chaperones:	Male:	Female:

GENERAL OVERVIEW & COSTS

Include information about itinerary, transportation and sleeping arrangements.

EDUCATIONAL PURPOSE AND OUTCOMES

STUDENT PREPARATION

Outline the skills or physical abilities required before students participate in the planned activities for the trip, e.g., swimming ability and conditions for hiking or cycling. Please outline any accommodations that may be needed.

SUPERVISION

Explain how additional supervisors (chaperones) will be obtained and the skills, knowledge, and direction needed for them to fulfill their roles and the first aid qualifications they possess.

EMERGENCY PREPAREDNESS PLANNING & PROCEDURES

1. *Outline possible alternate plans and what you will do in case of emergency or if someone becomes ill/injured.*
2. *Conduct a risk analysis using AP261 Appendix A: Approved and Prohibited Activities *Yellow activities require Superintendent approval, even if it is a day trip)*

EQUIPMENT

Provide a list of clothing and equipment needed and how it will be obtained (if applicable)

COMMUNICATION

Describe the communications technology that will be implemented during the activity. This may include a cell phone, satellite phone, VHF radio, SPOT transmitter, etc. (Ensure that the coverage described exists and will work during an emergency.)

Include information on how the school and/or parents can contact the adult-in-charge during the activity.

SPECIAL CONSIDERATIONS

Identify any medications that may need to be administered during this trip or any students with supervisory needs that would affect the supervisory ability or planned activities.

Supervising teacher/coach signature

Principal's signature for approval

Superintendent Signature for approval