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AP 260B Field Trip Request Form

Teachers requesting to take their stu supervisor as per the approval require					their school principal or
School:		Dat	e(s) of Trip:		
Teacher:	Grade: # of Students:				
Purpose of Trip:					
Type of Trip (Circle one) Day Tri	p Overni	ight Trip		Total #	of Days:
Destination:					
Departure Date/Time:			Return Date/Time	:	
On Location Staff Contact					
Contact 1:			Phone Number	:	·····
Contact 2:			Phone Number	·	
Chaperones					
Number School Personnel Attending Names & contacts of all Chaperones				•	nes:
Chaperone Name	Staff	Non-Staff	Contact #	Confirmed	Chaperone
Chaperone Name	Personnel	Personnel	comac n	Commission	Emergency Contact Name/ Phone Number

Supervisor and Chaperone's Responsibilities (please list responsibilities of each):All principals and teachers in charge need to understand the supervision requirements on the document (make reference).
Describe how the field trip meets the Common Consistent Curriculum or educational outcomes.
Meal Arrangements: (Be specific – location of meals, etc.)
modify a variage monitor (Do opposition of modify otto.)
Emergency Management: Is there an emergency plan in place for any kind of emergencies? Do you have copies of incident reporting forms? Have you confirmed emergency procedures with OHS? Who is identified as having First Aid for this field trip? Is there a Level 3 First Aid Kit available for this field trip?
Transportation: (TO BE COMPLETED AFTER APPROVAL)
Mode of Transportation:
Transportation Request Submitted to KTCEA Transportation: YES or NO
Driver Name(s): Number of Busses:
Route (Be specific i.e. Highway 986 to Peace River, Highway 2 to Grande Prairie)
Accommodation (if any) (TO BE COMPLETED AFTER APPROVAL) Be specific with details – if more than one accommodation is required please include all details.
Accommodation Name:
Accommodation Address/ Phone #
Date Accommodation
Check in times:
Rooming list (include on separate sheet if necessary)

Itinerary (Be specific and detailed – include items such as departure times and location, activities, travel time, meal times, return home, etc.) Date/Time Detail

Source of Revenue:		\$
Source of Revenue:		\$
Source of Revenue:		\$
TOTAL REVENUE		\$
EXPENSES: (Include meals, accommodation, transportation,	activities costs,	etc. All costs of the field trip)
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eminders:				
once the Field Trip Is Approved, You N	leed To:			
 Notify Transportation Manager 	of final a	pproval (if r	equiring transportation)	
□ Notify Foods Manager/Cooks of				rip i.e. Cancelling lunch for
number of students, or needing				
 Notify and prearrange the mea reservations at a restaurant, et 		when using	g off site services (i.e. Orderin	ig pizza, pre-book
 Notify and prearrange accomm 	,	off site and	provide the details including r	noming arrangements to the
Deputy Superintendent's office				coming arrangements to the
 Ensure that a copy of the accid 				e on hand in the case of
emergency.		•		
 Have an emergency contingen 				
 Ensure the Consent form has No Student Can Leave School Pren 				
dditionally, any chaperone must be adthics & Standards.	dhere to	the Kee Tas	Kee Now Tribal Council Edu	cation Authority Code of
haperone Signature Sheet				
Chaperone Name	Staff	Non-Staff	Signature	Contact #
	✓	✓		
ne above signature is verification to derstanding of the roles, respons Ethics.				
RECOMMENDED - NOT RECOMME	ENDED		APPROVED – NOT	APPROVED
			DEDITY SUBEDINTENDS	ENT (or delegated authority
RINCIPAL			DEFOTT SOFERINTENDE	(a g a