

AUTHORIZATION FOR DIVISION FIELD TRIPS

School

Teacher(s):

Curricular Focus of Trip:

Date of Departure (dd/mm/yyyy):

Date of Return (dd/mm/yyyy):

Destination(s)	Contact Person(s)	Phone No.
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Grade(s):

Number of Students:

Number of Teachers:

Number of Adult Supervisors:

Provision for student not attending have been made: YES NO NA

Method of transportation:

Schedule of trip (include as part of attached itinerary):

Anticipated cost of trip to each student:

Are all, or a portion of costs being subsidized?: YES NO NA

Accommodations:

Male and female supervision provided?: YES NO NA

For In-City and Out-Of-City (In Province) Field Trips

 Signature of Principal to authorize the field trip

 Date

For Out-Of-Province In-Canada and Out-Of-Country Field Trips

 Approval of School Operations Services

 Date