

**REQUEST FOR PRINCIPAL APPROVAL OF OUT-OF-SCHOOL EVENT**

(Please complete and submit to the Principal at least two (2) weeks prior to the date of proposed trip or excursion.)

TEACHER(S): \_\_\_\_\_ SCHOOL: \_\_\_\_\_

PURPOSE OF TRIP: \_\_\_\_\_  
\_\_\_\_\_

GRADE(S) INVOLVED: \_\_\_\_\_ TOTAL NUMBER OF STUDENTS: \_\_\_\_\_

DESTINATION: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

PROPOSED DATE(S): \_\_\_\_\_

STUDENT SUPERVISION RATIO: \_\_\_\_\_

PRE-EXCURSION ACTIVITIES: \_\_\_\_\_  
\_\_\_\_\_

FOLLOW-UP ACTIVITIES: \_\_\_\_\_  
\_\_\_\_\_

**FINANCIAL DETAILS:** Cost Breakdown -  
 Transportation: \$ \_\_\_\_\_  
 Entry Fees: \$ \_\_\_\_\_  
 Other: \$ \_\_\_\_\_ Please Specify: \_\_\_\_\_  
 Total Cost: \$ \_\_\_\_\_  
 Cost Per Student: \$ \_\_\_\_\_

**TRAVEL ARRANGEMENTS:**  
 Form of Transportation: \_\_\_\_\_  
 Name of Transporting Company (if applicable): \_\_\_\_\_  
 Telephone Number: \_\_\_\_\_

TIME OF DEPARTURE FROM SCHOOL: \_\_\_\_\_ TIME OF RETURN TO SCHOOL: \_\_\_\_\_

**\* PLEASE NOTE THAT SCHOOL VANS MAY ONLY BE USED FOR LOCAL DRIVING AND ON CITY ROADS ONLY DURING REASONABLE WEATHER CONDITIONS. IF MODE OF TRANSPORTATION IS BY BOARD BUSETTE AND DESTINATION IS OUTSIDE THE LIMITS OF THE COUNTIES OF PEEL, DUFFERIN, HALTON, SIMCOE, WELLINGTON, YORK AND THE METROPOLITAN TORONTO BOUNDARY, THE APPROVAL OF THE FAMILY OF SCHOOLS' SUPERINTENDENT IS REQUIRED. (GAP 801.00, PART E)**

TEACHER ASSUMING OVERALL RESPONSIBILITY: \_\_\_\_\_  
 (ADULT SUPERVISORS AS PER ATTACHED LIST)

APPROVAL OF EVENT: \_\_\_\_\_  
 (Date) (Principal's Signature)

**\* I HEREBY APPROVE THE USE OF A BOARD BUSETTE FOR THE ABOVE APPROVED OUT-OF-SCHOOL EVENT.**

\_\_\_\_\_  
 (Superintendent's Signature) (Date)

Distribution: Teacher: \_\_\_\_\_ Principal: \_\_\_\_\_ Superintendent: \_\_\_\_\_

Attach: List of Adult Supervisors