



**QUESNEL SCHOOL DISTRICT  
ATTACHMENT 'A' – POLICY 445 –  
OUT-OF-SCHOOL LEARNING EXPERIENCES**

**SCHOOL TRIP/PROGRAM APPROVAL**

**THIS FORM (ATTACHMENT "A") IS TO BE SIGNED BY THE TEACHER SPONSOR AND PRINCIPAL, OR DESIGNATE, INDICATING THAT THIS TRIP IS A SCHOOL FUNCTION. THE PARENT OR GUARDIAN MAY RETAIN IT.**

1. Description of the Function: \_\_\_\_\_  
\_\_\_\_\_
2. Educational Value: \_\_\_\_\_  
\_\_\_\_\_
3. Dates and Times:
  - Departure Date & Time from Quesnel: \_\_\_\_\_
  - Departure & Arrival Assembly Point in Quesnel: \_\_\_\_\_
  - Estimated Return Date & Time to Quesnel: \_\_\_\_\_
4. Destination(s): \_\_\_\_\_
5. Group Description - Name: \_\_\_\_\_

**All school groups travelling with mixed gender students, must be supervised by mixed gender chaperones.**

**No. of Students:** \_\_\_\_\_  
**No. of Chaperones:** \_\_\_\_\_

6. Method of Travel: \_\_\_\_\_
7. Accommodation: \_\_\_\_\_  
Contact Telephone Number: \_\_\_\_\_
8. Financial Arrangements (Cost per student):

Transportation:	\$ _____
Accommodation:	\$ _____
Other: (Please specify) _____	\$ _____
<b>TOTAL:</b>	<b>\$ _____</b>

**(PLEASE MAKE CHEQUES PAYABLE TO THE SCHOOL)**

Due Date: \_\_\_\_\_

**PLEASE NOTE THAT THE TEACHER SPONSOR MAY PROVIDE ADDITIONAL INFORMATION ABOUT EQUIPMENT REQUIRED, ETC. REMEMBER THAT THE SCHOOL CODE OF CONDUCT IS IN EFFECT AT ALL TIMES DURING OUT-OF-SCHOOL LEARNING EXPERIENCES.**

Authorized signatures:

\_\_\_\_\_  
(Teacher Sponsor)

\_\_\_\_\_  
(Principal or designate)

**Parents - You may keep this page for your records and return the attached page to the teacher/coach sponsor.**