

SCHOOL: _____ DESTINATION _____

For Categories 1.0, 2.0(a), 2.0(b), 2.0(c) 3.0 and 4.0			For Principal Use
1.	Field Trip/Excursion Authorization Form submitted?	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
2.	All required Consent forms sent and returned?	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
3.	Alternate contact persons established?	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
4.	Transportation organized and confirmed?	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
5.	Emergency numbers secured?	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
6.	Costs established and collected?	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
7.	Equipment list established?	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
8.	First aid kit is accessible on the field trip/excursion?	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
9.	Safety review completed?	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
10.	Field Trip / Excursion Risk Assessment Form completed?	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
11.	Names and contact number of supervisors	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
12.	Volunteer Confidentiality Undertaking Form completed?	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
In addition, for Overnight Field Trips and National and International Trips:			
13.	Supervisor Consent Form for Overnight, National & International Field Trips has been completed?	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
14.	Itinerary established and sent home?	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
15.	Lodging booked?	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
16.	Medical facilities established?	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
17.	'Consent for Participation Risk Acknowledgement, Waiver & Indemnity For Nat'l & Int'l Field Trips' Form received?	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
18.	Canadian Government Travel Advisory sent home?	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
19.	International Travel - Parent/Guardian and Staff Consent Form for International Travel Forms completed?	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>

Teacher's Name

Teacher's Signature

Date

Principal or Designate Name

Principal or Designate Approval

Date