

OUT-OF-SCHOOL PROGRAM APPROVAL FORM

**RIVER EAST TRANSCONA SCHOOL DIVISION
OUT-OF-SCHOOL PROGRAM APPROVAL**

Instructions For Planning Out-Of-School Programs

1. Complete this form and submit it to the level appropriate Assistant Superintendent
2. Submit the form according to the time frames as indicated in regulation IJOA-R (B).
3. The application for your Out-of-School Activity will not be considered unless all necessary information has been submitted and the projected budget balances.
4. Plan all out-of-school programs in accordance with Manitoba Physical Activity Safety in Schools (MPASS).

(1) School: _____ Submission Date: _____

(2) Activity/Event: _____

(3) Description of Activity/Event: _____

(4) Location of activity/event (city, town, parks, etc.): _____

Province/state and country: _____

(5) Tour Company _____
(if applicable ie: Fehrway, EF, Explorica, etc.)

(6) Rationale/Curricular links: _____

For course credit

(7) Is this trip being planned in conjunction with another school? Yes No

If yes, please indicate school/contact person: _____

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(8) Activity/Event details:

Departure:	Day:	Date:	Time:
Return:	Day:	Date:	Time:
Days absent from school (do not include weekend days):			
Mode of transportation:	Bus: <input type="radio"/> Airplane: <input type="radio"/> Other Commercial Carrier: <input type="radio"/>		
Private Vehicle(s): <input type="radio"/>	Name of Carrier:		
Accommodation information:			
Name:			
Address:			
Phone number:			

(9) Itinerary: _____

(10) Students participating

- (a) Grade: _____ Number: _____
- (b) Grade: _____ Number: _____
- (c) Grade: _____ Number: _____
- (d) Maximum number of students: _____

(11) Method of student selection: _____

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(12) Adult leadership and supervision (provide gender breakdown):

(a) Teacher in charge: _____

(b) Additional teachers involved: number _____ (list names below)

- _____
- _____

(c) Support staff involved: number _____ (list names below)

- _____
- _____

(d) Volunteers involved: number _____ (list names below)

- _____
- _____

(e) Resource people other than school personnel: number _____ (list names below)

- _____
- _____

Ratio (adults/student): _____

(13) Budget:

	Projected Cost per student	Total
Travel:		
Accommodations:		
Other:		
Food:		
Admission fees, etc. (specify below):		

Total Projected Cost: _____

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Total Projected Revenue	Amount	Total
By School Funds:		
By Student Payments	$\frac{\text{_____}}{\text{amt. each student pays}} \times \frac{\text{_____}}{\text{no. of students}}$	
By RETSD Funds		
Other		

Total Projected Revenue: _____

(14) Emergency procedures check list:

- Emergency Action Plan in place (refer to MPASS)
- Health plan in place for individual students with special needs
- MPASS has been referenced for applicable activities
- Student personal information has been collected (see IJOA-R (D)(6))

(15) A signed Parental Informed Consent form (IJOA-E2) has been submitted for each student. Yes :

Signatures:

Teacher In Charge

Principal

Assistant Superintendent

Date

Effective Date: December 16, 2003
 Amended Date: June 1, 2004; January 15, 2008; Dec/2011; April 17, 2018; November 15, 2022
 Board Motion(s): 683/03; 370/04; 8/08; 94/18; 278/22
 Legal/Cross Reference: IJOA-R- Procedures for Out of School Education;
 IJOA-E2 Parental Informed Consent Form;
 Manitoba Physical Activity Safety in Schools (MPASS)

Review Date: