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| Niagara Catholic District School Board Request for Co-Curricular Excursions  (Reference - Co-Curricular Excursions AOP 400.2.2) |
| This form applies to all Provincial, National or International Co-Curricular Excursions |

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| School:  Click or tap here to enter text. | Requested By:  Click or tap here to enter text. | Date:  Click or tap to enter a date. |

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| Description of Co-Curricular-Based Excursion | | | |
| **Type of Event**  Provincial (Non OFSAA)  OFSAA  National  International | | **Participation Criteria:**  Direct Competition (i.e., SOSSA) | |
| Invited to Attend (attach letter of invitation)  Qualification: Provide details. | |
| Event Name: Click or tap here to enter text. | | | |
| Event Address: Click or tap here to enter text. | | | |
| Departure Date:  Click or tap to enter a date. | Departure Time: Enter time | | Number of Days:  Click or tap here to enter text. |
| Return Date:  Click or tap to enter a date. | Return Time: Enter time. | | Number of Nights:  Click or tap here to enter text. |

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| Co-Curricular Excursions **(Only if contracting a Tour Company)** | |
| 1. Attach three (3) proposals from tour or travel company vendors. 2. Identify below the three vendors and quotes. 3. Indicate the Principal approved vendor. | |
| Vendor #1 Click or tap here to enter text.  Vendor #2 Click or tap here to enter text.  Vendor #3 Click or tap here to enter text. | $/Student Click or tap here to enter text.  $/Student Click or tap here to enter text.  $/Student Click or tap here to enter text. |
| Principal Approved Vendor #  Additional monies not covered by the tour company, amount and explain: Click or tap here to enter text.  If not selecting the lowest price vendor, please provide a rationale:  Click or tap here to enter text. | |

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| Co-Curricular Excursion Expenses **(Not Contracting a Tour Company)** | | |
| **Transportation Required**:   1. Attach three (3) proposals from transportation company vendors. 2. Identify below the three vendors and quotes. 3. Indicate the Principal approved vendor. | | |
| Private Vehicle  Rental  Bus  Taxi  Air/Train [Complete Airline Checklist](https://docushare.ncdsb.com/dsweb/Get/Document-1871130/Airline%2c%20Tour%20Company%2c%20Insurance%20Checklist.pdf) | [Authorization to Transport Students](https://docushare.ncdsb.com/dsweb/ImageStoreViewer/Document-1094577)  [Request to Transport Student Consent Form](https://docushare.ncdsb.com/dsweb/Get/Document-1094586/Request%20to%20Transport%20Student.pdf)  [Reimbursement of Travel Expenses 2025](https://docushare.ncdsb.com/dsweb/ImageStoreViewer/Document-2170408)  (Include map)  [Volunteer Driver AOP 302.4](https://docushare.ncdsb.com/dsweb/Get/Document-1981975/302.4%20-%20Volunteer%20Drivers%20AOP.pdf) | |
| Attach three (3) proposals for transportations | | |
| Quote #1 Click or tap here to enter text.  Quote #2 Click or tap here to enter text.  Quote #3 Click or tap here to enter text. | $/Student Click or tap here to enter text.  $/Student Click or tap here to enter text.  $/Student Click or tap here to enter text. | |
| Principal Approved Vendor #  If not selecting the lowest priced quote, please provide a rational:  Click or tap here to enter text. | | |
| **Accommodation Required:**  YES    NO   1. Attach three (3) proposals from transportation company vendors. 2. Identify below the three vendors and quotes. 3. Indicate the Principal approved vendor.     Address of Accommodation/Hotel: Click or tap here to enter text.    Attach three (3) proposals for accommodation: | | |
| Quote #1 Click or tap here to enter text.  Quote #2Click or tap here to enter text.  Quote #3 Click or tap here to enter text. | $/Student Click or tap here to enter text.  $/Student Click or tap here to enter text.  $/Student Click or tap here to enter text. | |
| Principal Approved Vendor #  If not selecting the lowest price quote, please provide a rational:  Click or tap here to enter text. | | |
| **Total Costs:**  Transportation Cost Per Student: Click or tap here to enter text.  Accommodation Cost Per Student: Click or tap here to enter text.  Additional Costs Per Student Include: Click or tap here to enter text. | | |
| Principal: Click or tap here to enter text. | | Signature: |  |
| Principal signature indicating the fairest price for transportation, accommodation and all other expenditures are in accordance with the Co-Curricular Excursion AOP 400.2.2 | | |  |

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| Supervision: To be completed by Principal/Administration  Same Day Event 1:20, Multi-Day Event (Within Canada) 1:15, Events Outside of Canada or Continental USA 1:8 (AOP 400.2.2 Supervision #3) | |
| Supervising Staff Name: | Coverage Code for Easy Connect: |
| Click or tap here to enter text. | Choose an item. |
| Click or tap here to enter text. | Choose an item. |
| Click or tap here to enter text. | Choose an item. |
| Name of Principal Approved Chaperone/Volunteer | Confirmation of Vulnerable Sector Background Check Received (Principal/Admin Initials) |
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| Required Approvals | | |
| **Name** | **Signature** | **Date** |
| Teacher In Charge:  Click or tap here to enter text. |  |  |
| Principal:  Click or tap here to enter text. |  |  |
| Superintendent Approvals: Only if necessary  All co-curricular excursions for provincial or national competitions, and OFSSA Festival or Championship regardless of location, requires principal/administrative approval, the Family of Schools’ Superintendent of Education approval, and the Superintendent of Program and Innovation approval prior to the date of the competition (AOP 400.2.2 Approvals #2) | | |
| Family of Schools Superintendent: |  |  |
| Superintendent of Program and Innovation: |  |  |

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| The following information must be included at the time of submission, unless otherwise deferred by a Superintendent of Education: |
| This Request for Co-Curricular Excursions form completed in full (including supporting documents)  [Authorization to Transport Students](https://docushare.ncdsb.com/dsweb/ImageStoreViewer/Document-1094577)  [Request to Transport Student Consent Form](https://docushare.ncdsb.com/dsweb/Get/Document-1094586/Request%20to%20Transport%20Student.pdf)  [Reimbursement of Travel Expenses 2025](https://docushare.ncdsb.com/dsweb/ImageStoreViewer/Document-2170408) (Include map)  List of participants including staff, students and chaperones created and copy provided to the school office  Airline/Tour Company/Insurance checklist completed (if required)  Confirmation of arrangements, if required for students with special accommodations  Confirmation that student(s) will attend an appropriate liturgy or appropriate prayer service/religious observance if  the trip occurs on a Day of Obligation  Confirmation that emergency information is current and up to date at the school  Confirmation that prior to departure, students are instructed on appropriate behavior and safety procedures and  requirements for a specific trip  Confirmation that all participating staff/chaperones have reviewed and understand the Board’s Education Field Trip  Policy 400.2.2 and (if applicable) Volunteering in Catholic Schools [AOP 800.9](https://docushare.ncdsb.com/dsweb/Get/Document-1982023/800.9%20-%20Volunteering%20in%20Catholic%20Schools%20AOP.pdf)  Confirmation that appropriate OPHEA safety Guidelines have been reviewed and that high care activities are  supervised by certified personnel  Confirmation of valid operator’s license required (i.e., car, boat, etc.)  Confirmation that parent/guardian permission form and Informed Consent are complete for each participating  student  [Permission & Informed Consent (Day and Extended Day Trip)](https://docushare.ncdsb.com/dsweb/Get/Document-2115253/Permission%20&%20Informed%20Consent%20(Day%20Trip).pdf)  [Permission & Informed Consent (Overnight and Extended Overnight Trip)](https://docushare.ncdsb.com/dsweb/Get/Document-2115254/Permission%20&%20Informed%20Consent%20(Overnight%20and%20Extended%20Overnight%20Trip).pdf)  Itinerary supplied to school office including name and contact number of supervising teach in-charge  Confirmed number of supervisors as required by the Board’s Education Field Trip Policy 400.2.2  Driver-Authorization to Transport Students forms completed by staff or volunteer drivers, if required by the trip and  **confirmation** that staff/volunteer drivers have a minimum of $1 Million in auto insurance, OPCF #44R  endorsement and will not exceed six (8) students in a vehicle unless properly licensed  Copy of three (3) written proposals which are specific to the trip; and all forms completed in full |