

## PROPOSAL for HIGHER RISK ACTIVITIES

Form 260-05

<b>TRIP INFORMATION</b>		<b>SCHOOL:</b>	
TRIP NAME:			
DESTINATION:			
DEPARTURE DATE:	DEPARTURE TIME:	RETURN DATE:	RETURN TIME:
PURPOSE OF TRIP:			# OF STUDENTS:
			# OF ADULTS:

SUPERVISION		
NAMES OF SUPERVISORS (attach list if needed)	CONTACT PHONE #	CONTACT EMAIL ADDRESS
LEAD TEACHER:		
OTHER SUPERVISOR:		
OTHER SUPERVISOR:		
SERVICE PROVIDER: (if applicable);		

TRANSPORTATION	
Check all that apply below:	ESTIMATED COST OF TRIP:
<div style="display: flex;"> <div style="flex: 1;"> <b>METHOD</b>  <input type="checkbox"/> Walking  <input type="checkbox"/> Board owned vehicle  <input type="checkbox"/> Public transportation  <input type="checkbox"/> Charter bus  <input type="checkbox"/> 15 Passenger van  <input type="checkbox"/> Multifunction activity bus  <input type="checkbox"/> Rental van  <input type="checkbox"/> By service provider  <input type="checkbox"/> Transport not provided (participants responsible for own)  <input type="checkbox"/> Other (specify):         </div> <div style="flex: 1;"> <b>DRIVER</b>  <input type="checkbox"/> Professional driver  <input type="checkbox"/> Volunteer driver (staff or another supervisor)  <input type="checkbox"/> Volunteer driver (student)  <input type="checkbox"/> Other (specify):   <b>EQUAL ACCESS FOR ALL STUDENTS:</b>  <input type="checkbox"/> Yes   <input type="checkbox"/> No   <input type="checkbox"/> See attached         </div> </div>	SOURCES OF FUNDING (i.e., cost / student, other sources):  ALTERNATIVE ACTIVITY FOR NON-PARTICIPANTS: <input type="checkbox"/> Yes <input type="checkbox"/> No Details:  TRIP CONTINGENCY PLAN (attach details if not enough space):

EDUCATIONAL VALUE	
Goals and / or Student Learning Outcomes:	
<input type="checkbox"/> Environmental Sustainability <input type="checkbox"/> Indigenous Education <input type="checkbox"/> Curriculum <input type="checkbox"/> Physical Education <input type="checkbox"/> Literacy <input type="checkbox"/> Numeracy <input type="checkbox"/> Community Connections <input type="checkbox"/> Arts & Culture <input type="checkbox"/> Other:	

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#### SAFETY GUIDELINES

I am familiar with relevant, district Administrative Procedures and Board Policies: ☐ Yes ☐ No  
 Administrative Procedures (i.e., APs 260-XX): <https://www.comoxvalleyschools.ca/administrative-procedures/>  
 Board Policies: <https://www.comoxvalleyschools.ca/board-policies/>

#### PRE-TRIP SKILL BUILDING & PREPARATION:

Check all pre-trip skills that students, volunteers and teachers will participate in to be best prepared for the activity / trip.

- |  |  |
|--|--|
| <input type="checkbox"/> Parent / guardian communications    | <input type="checkbox"/> Guest speakers                                |
| <input type="checkbox"/> Skill building activities           | <input type="checkbox"/> Event specific training                       |
| <input type="checkbox"/> Safety & risk assessment activities | <input type="checkbox"/> Gear equipment checks                         |
| <input type="checkbox"/> Other (explain below)               | <input type="checkbox"/> Trip intentions, expectations, and guidelines |

#### DETAILED TRIP PLAN:

(e.g., times, location, activity. Add as an attachment if needed) \* For complex outdoor trips, consider using the "Outdoor Trip Planning" document for guidance. \*

#### SUPERVISION PLAN:

- |  |   |                                      |                                       |
|--|---|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> Large or small group setting(s)       | <input type="checkbox"/> Lead / sweep                                   | <input type="checkbox"/> Head counts | <input type="checkbox"/> Buddy system |
| <input type="checkbox"/> Student behaviour guidelines in place | <input type="checkbox"/> Other elements of supervision plan as relevant |                                      |                                       |

#### KNOWN POTENTIAL RISK CHECKLIST:

Check all that apply:

- ☐ Injuries related to motor vehicle incidents enroute to and from the activity area
- ☐ Becoming lost or separated from the group or the group becoming split up
- ☐ Injuries related to slips, trips, and falls in the program area or enroute to / from it
- ☐ Acute or overuse injuries/conditions
- ☐ Injuries related to the physical demands of the activity and/or lack of activity skill
- ☐ Injuries related to colliding with a moving object or with a fixed object
- ☐ Injuries related to ill-fitting equipment, equipment malfunction, or failure to use the equipment properly
- ☐ If outdoors, sub-optimal weather or weather changes create adverse conditions students are not properly dressed for
- ☐ If outdoors, allergic reactions to natural substances
- ☐ If outdoors, injuries related to interactions with animals and plants in the environment
- ☐ Injuries related to capsizing of craft or falling out of craft
- ☐ Drowning or near drowning
- ☐ Illness related to poor hygiene
- ☐ Complications of an injury or illness due to remoteness and time to emergency services
- ☐ Psychological injury due to anxiety or embarrassment
- ☐ Other:

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#### EMERGENCY PLAN

Contingency kit(s) carried (stocked and accessible) check all that apply:

☐ First Aid      ☐ Repair Kit

Emergency communications technology carried / available (check all that apply):

☐ Cell phone      ☐ Radio (VHF, UHF)      ☐ Other (specify)      ☐ Personal locator beacon      ☐ Satellite phone

Name of primary first aider:

Current certification held:

Name of School Contact available 24/7:

School Contact's phone numbers: (W)      (C)

#### VOLUNTEER PLAN

Volunteer screening processes (check all that apply):

☐ Criminal Record Check      ☐ Volunteer Code of Conduct Form      ☐ Suitability to activity      ☐ Physical / health suitability      ☐ Relevant experience

**Volunteer Briefing Process** details re: their roles and responsibilities, briefing to be conducted when, where, how, and by whom:

☐ Pre-trip meeting:

☐ Conversation:

#### ATTACHMENTS CHECKLIST

Check all forms **that apply** and attach copies to this form:

☐ Form **260-06** Parent-Guardian Consent Form for Higher Risk Activities      ☐ Other Volunteer forms and requirements  
☐ Form **260-02** Volunteer Driver Application      ☐ \* Detailed Trip Plan for complex trips \*  
☐ Student Participant List      ☐ Other

#### ADMINISTRATION ONLY BOX

Criteria for success of off-site experience:    ☐ Met    ☐ Not Met

Process to determine success:

#### TRIP APPROVAL

Name of Lead Teacher:	Date	Signature
Name of Principal:	Date	Signature
Superintendent or Designate as needed (name and title):	Date	Signature