1. Departure and Return			
Departure date:	Departure time:		
Return date:	Return time:		
2. Pupils on Visit			
Classes or groups involved:		Number:	
Other Schools involved with details of pupils:			
3. Accompanying Staff			
Names		First Aid Qu	alification?
Names		yes	no
(visit leader)			
4. Educational Objectives of Visi	it		
5. Venues / Activities			

£

Package Tour Trips

£

Estimated costs to cover all expenses

Independent Trips

Travel Costs (flight or trains)		Cost per pupil	
Coach Hire			
Accommodation			
Other Trip Costs e.g. Activities, M	Iuseum Entr	y, Excursions, Staff Expenses etc. (pleas	se specify)
			£
Insura	nce (Oversea	s & UK Residential)	
Package tours – Is your insurance included in the package cost?	yes / no	CoL Insurance – Please include if not using Package Tour Insurance (see guidance sheet)	£
Contingency (please add 5%)	£	Total Estimated cost per pupil	£
Total Estimated Cost	c	Deposit – termly invoice preceding the trip	£
Total Estimated Cost	Balance – termly invoice the trip is taking pla		£
2. Approval			
a. Approval in principle			
I request approval in principle for the propos	ed visit		
Party leader's signature:		Date:	
	ad having given t	and other appendices to this document being fille their approval to arrangements. The educational his document.	
Headmistress' signature:		Date:	
b. Bursar's approval of insura	nce and fina	nce	
Bursar's signature:		Date:	
c. Deputy Head's (Pastoral) a	pproval		
Deputy Head's (Pastoral) signature:		Date:	

1. Availability and details of mol	bile phones
Name	Mobile Phone number
1	
2	
3	
4	
2. Home contact People	
1 st contact	2 nd contact
Name:	Name:
Daytime telephone number:	Daytime telephone number:
Night-time telephone number:	Night-time telephone number:
Other telephone number:	Other telephone number:
Address:	Address:
Postcode:	Postcode:
3. Parents and Other extra helpe	ers
Name	Telephone number
4. Transport Requirements	
If transport is required, specify requirements:	
5. Outside Agencies	
If an outside agency or holiday or travel firm is infill in and attach the <i>Firm Selection</i> form	volved, including adventurous activities, , and tick $\hfill\Box$
	Checked by Deputy Head (Pastoral)
6. Overnight Stay	
If the visit involves overnight stay, fill in and attac	th the $Accommodation for Out-Of-School Visits$ form , and tick \Box
	Checked by Deputy Head (Pastoral)

7. Exc	changes	and	Н	ome	Stav	VISIT
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Is this trip an exchange or home stay visit?		
Will standard letters be used to explain to parents?		
Has confirmation about host families been received?		
8. Risk assessment & Activities req	uiring extra chec	ks
For all trips, make sure to fill the risk assessment form	n on page 5.	
	Chec	ked by Deputy Head (Pastoral)
9. Pupils with known Medical Diffi	iculties	
Name:	Disability:	
10. Parental Consent and Medical I		
Are all consent forms and medical questionnaires con	1 0	
Are any inoculations or other special precautions adv If so, attach details		his trip? Sked by Deputy Head (Pastoral)
Have arrangements been made to handle any known	medical condition?	
All details relating to pupils and their medical conditi	ons attached – che	cked by Deputy Head (Pastoral)
11. Approval		
a. Forms checked and Copy retained by t	he Deputy Head (Pas	storal)
I have discussed this visit with the organiser and I am satis National Guidance and school policy.	fied that the planning has	peen carried out in accordance with
Please ensure a detailed itinerary and a final list of pupils a with the Headmistress, Deputy Head and Bursar.	ttending seven days befor	e the party is due to leave is lodged
Please submit a report and evaluation of the visit, including not later than two weeks thereafter.	details of any incidents, a	s soon as possible on return but
Deputy Head's (Pastoral) signature:		Date:
b. Headmistress' Final Approval		
I am satisfied with all aspects including the planning, organ approval for it to go ahead.	isation and staffing of this	proposed visit. I therefore give
Headmistress' signature:		Date:
		•

1. Risk Assessment form

Visit details:	Carried out by:	Date:
POTENTIAL HAZARD	WHO COULD BE HARMED?	How to Manage Risk?

Please retain this form until after the visit

	IN ADVANCE OF THE VISIT	Yes	No	n/a
1a	Have you checked your trip date against any possible clashes on the Portal? Discuss with the Deputy Head and his Assistant and ensure the date is added to the calendar at once.			
1b	Have you clearly identified the aims of the visit?			
2	Is the visit appropriate to the age, ability and aptitude of the group?			
3	Has there been suitable progression / preparation for pupils prior to the visit?			
4	Does the visit conform to National and school guidelines?			
5	If staff are going to lead adventurous activities, have they been 'approved' in line with school and National guidelines?			
6	If using an external provider for adventurous activities, does the provider hold either an LOtC Quality Badge or an AALA Licence?			
7	Do you know or have you visited the locations?			
8	Do the adults in the party have the appropriate skills for the visit? (Check this carefully and arrange suitable training and/or briefing to clarify your expectations.)			
9	Have any adult helpers (non-teachers) been approved by the Headmistress as to their suitability?			
10	Is the level of staffing sufficient for there to be adequate supervision at all times? This will be determined by a) the type, level and duration of activity, b) the requirements of the group, c) the experience and competence of staff and d) the venue, time of year and prevailing conditions			
11	Are you (the visit leader) aware of, and comfortable with your role?			
12	Are all staff and helpers aware of and comfortable with their roles?			
13	Is insurance cover adequate?			
14	Has a suitable risk assessment been carried out and shared with all involved?			
15	Do you and/or other staff know the pupils that you are taking away?			
16	Have you advised pupils in advance about your expectations of their behaviour? Are pupils aware of any 'rules'?			
17	Are pupils parents aware of the nature and purpose of the visit? Has written consent been obtained?			
18	Have you issued all relevant details? (e.g. Itinerary, kit lists etc.)			
19	Are you and other staff aware of the relevant medical details of pupils?			
20	Has parental consent been gained for named staff to administer specific drugs/injections, and have named staff received appropriate training, if appropriate?			
21	Are you aware of whether members of staff/helpers have medical conditions?			
22	Are you and/or other staff able to administer first aid, and up-to-date and proficient?			
23	Have you ordered a first aid kit appropriate to the visit?			
24	Have you considered the suitability and safety of the transport to be used, and is there an appropriate balance between time spent travelling and time spent on site?			
25	Is there flexibility within the programme? Do you have appropriate contingency plans that would be suitable in the event of changing conditions, staff illness, etc?			
	IN ADVANCE OF THE VISIT	Yes	No	n/a
28	For journeys taking place outside school hours, do you have emergency contact phone			

			1	
	number/s for designated staff?			
29	Are you aware of the appropriate action to be taken in the event of a major accident/incident?			
30	Have you obtained references for any service providers you intend to engage?			
31	Has the Head or Deputy met a senior manager of the provider's management to discuss their suitability?			
32	Will you need a weather forecast or other local information such as tide times, etc. and do you know where to get this information?			
33	Is a mobile phone necessary? If so, can you get reception in the area you are visiting?			
34	Will your group need waterproof clothing, boots or other equipment? If so, have you checked who is responsible for ensuring that this equipment is fit for the purpose?			
35	Does any specialist equipment conform to the standards recommended by responsible agencies?			
36	Have all financial matters been dealt with appropriately and approved by the Bursar?			
37	Has the venture been approved by the Headmistress and (if necessary) the Governors?			
	ON THE DAY	Yes	No	n/a
38	Do you have a list of pupils/groups (+emergency phone numbers if out of school hours)			
39	Have you ensured that it has the names of all participants, including adults, and contact details if out of school hours have been given to the people required by the policy?			
40	Have you sufficient cash/spare cash?			
41	Have you the relevant literature, work sheets, clipboards, etc?			
42	Have you an appropriate first aid kit, + sick bags, litter sack, etc. if needed?			
43	Are you checking/double checking pupil numbers at appropriate times?			
44	Have you warned the group in advance of potential hazards? If necessary, have you arranged to supervise these areas particularly carefully?			
45	Are pupils aware of the procedure in areas where there is traffic? (eg. If walking, is it pairs, crocodile, groups? – may pupils run? – are pupils aware of the procedure at road crossings? etc.)			
46	Have you arranged a clear recall signal if your group is working away from you? And have you taken steps to ensure that they all understand it and can respond effectively?			
47	If you are arranging a rendezvous for the group after a period of time, have you ensured that each group (and each member of staff) has a watch and knows exactly where to meet?			
48	Do pupils know what action they should take if they become separated from the group?			
49	Are you conducting on-going risk assessment, and if necessary adapting the programme to suit changed or changing circumstances?			
	AT THE END OF THE VISIT	Yes	No	n/a
50	Have you ensured appropriate arrangements are in force for the dismissal of pupils?			
51	Have you reported back to the Headmistress?			
52	Has the group been debriefed and any relevant follow-up work completed?			
53	Have all loose ends been tied up, eg. Paperwork, finance, thank you letters etc.?			
54	Have you evaluated the visit, and if appropriate made notes of points to be considered for future visits?			