

INTERNATIONAL FIELD TRIPS — FINAL APPROVAL

(Completed by the Lead Teacher. Submitted to the Superintendent or designate. To be submitted with accompanying documents 2 weeks prior to scheduled Board meeting.)

1. Event Details				
Event(s) and Destination(s): Yokohana FArea Tapa		Date(s): July 19 2024 to Aug 3 2024.		
Name of Lead Teacher:		School: MHHS / CHHS		
Extracurricular Group/	am/Class: se Yamode Exchange Program			Total Control of the
Number of male students:	Number of female		Supervisor to Student Ratio:	A
Names of other Supervisors: Ghen Mort, Rabhael Robinson, Jonya Mori				
2	. Procedures: I can co	nfirm the following	z :	
1. I have prepared participating students with pre-teaching that connects the trip to their learning.				
2. I have booked transportation.				
3. I have collected all necessary volunteer forms.			V	
4. I have collected fees from all participants.			linguithit on an dang me in the A. Valencia,	V
5. All finances related to this trip have been handled in the school office.				
6. I have met with volunteers and	6. I have met with volunteers and chaperones and explained their duties in full.			
 I have held meetings to inform all the participants' parents of trip itinerary, expectations for students, contact information while on the trip, and communicated post-event pick-up arrangements. 				
8. I have informed parents of vaccination recommendations, particularly for Measles and for specific vaccinations required by the destination country: https://travel.gc.ca/travelling/health-safety/vaccines				
9. I have registered (or verified)	. I have registered (or verified) each participant: https://travel.gc.ca/travelling/registration			
10. I have reviewed and communicated the relevant travel health and safety risks to all participants and participating students' parents.			Image: Control of the	

	3. Risk review: I can confirm the following:	
11.	A satisfactory report travel from Government of Canada – Travel and Tourism https://travel.gc.ca/travelling/advisories	
12.	The planned activities are consistent with the standards in <u>School Physical Activity, Health & Education Resource for Safety</u> and in compliance with MHSD policy.	2
13.	The planned activities are suitable to the age, developmental level, and physical condition of the participants.	
14.	14. Participants have been progressively taught and coached to perform planned activities properly and to avoid the dangers inherent in the planned activities.	
15.	15. The equipment for the planned activities is adequate and suitably arranged.	
16.	16. The planned activities will be adequately supervised for the inherent risk involved.	
17.	We have a suitable first aid kit.	
Glen 19.	Name(s) of the supervisor(s) with current First Aid training: Mort Tonya Mort Rochael Robinson The medical facilities nearest our destinations are:	

	inteer Driver(s):		
Flight details Airline: Flight #	Departing flight (and connections): west Jet Flight # ws80	Calgory, 188 (44C) July 14, 2024 3:00 PM	
	Returning flight (and connections): West Jet Flight # WS81	Morita Int. (NRT) August 3, 2024 6:30PM	



601-1st Avenue SW, Medicine Hat, AB T1A 4/7 🕸 Phone 403.528.6700 🦵 Fax 403.529.5339 🔞 www.mhpsd.ca

5. Expenses				
Total cost of trip:	Fundraised:	School funds:	Cost to student:	
must be	•	days after return of the trip.	15) - Final trlp accounting report	
Did you use a tour compar Yes - At		LFlights only - Ovection	Activity Risk Assessment (720 E 006)	
	6. A	ttachments		

	6. Attachments	
1.	Completed International Trips - Approval in Principle (720 E 010)	
2,	Completed Consent for National – International Trips for all students (720 E 014).	V
3.	Completed Consent Letter for Children Travelling Abroad for all students, signed by parents/guardians and preferred witness. (need birth certificate/Topon addresses)	V
4.	Completed Volunteer Registration Form for each non-staff supervisor (720 E 013)	V
5.	Completed Automobile Driver Authorization Form for any person transporting students (720 E 007).	
6.	Copy of all travellers' passports (confirming date of expiry 6 months from expected date of return).	N
7.	Completed Travel Declaration for National-International Trips (720 E 014) and Travel Trip Accounting 720 E 015.	
8.	Complete list of participants including name, students' cell phone numbers (if available), parent contact information, identification of specific medical conditions, allergies, or special considerations on provided spreadsheet. If any participant is known to have severe allergic reactions, or has specialized medical conditions, attach a plan outlining additional precautions, created in consultation with the parent.	
9.	Duties of all supervisors.	V
10.	Parent meeting(s) attendance sheet(s), agendas/minutes.	
11.	List of locations and contact information of Canadian Government offices abroad. https://travel.gc.ca/assistance/embassies-consulates	Ø
12.	Names, addresses and contact numbers for each accommodation, listed by date.	
13.	Final and complete itinerary.	·/

8. Declarations and Signatures

Lead Teacher:

I have reviewed AP 720 P 001 and understand my responsibilities as a lead teacher for this international trip. I confirm the information in this form to be true.

Signature:

Date:

Hoy 3, 2024

Secretary Treasurer or Designate:

I have reviewed the submitted documents for this international trip and confirm that the Lead Teacher's plans comply with School and Division Procedures.

Signature:

Date:

OHS Officer:

I have reviewed the submitted documents for this international trip and confirm that the Lead Teacher's plans comply with School and Division Procedures.

Signature:

Date:

Superintendent or Designate:

I have reviewed the submitted documents for this international trip and I approve this trip.

Signature: (

Date