

Excursion Checklist / Request Form for Day Trips (excludes Bushwalks/Camps)



**FREE REFORMED
SCHOOL ASSOCIATION**

My heart I offer to You Lord - promptly and sincerely

School			
Date of Excursion			
Year level / group			
Number of Students			
Departure Time		Return Time	
Program attached?	Yes	No	N/A
If no, when?			
Teacher in Charge			
Educational Benefit / Justification			
Destination			
Has approval been received from relevant authorities?	Yes	No	N/A
If no, when?			
Contact Details			
Supervision Details			
<p>IMPORTANT NOTE: If the location is remote or isolated, ie, where outside assistance is more than 1 hour away, then at least one supervisor must have advanced first aid qualifications. (For more details read the I002 Camp and Excursion Policy.)</p> <p>Supervision must comply with the Adventure Activity Standards; see http://www.outdoorswa.org.au/Industry/aas</p>			
Choose the applicable category:			
General Excursion (non- water based)			
<p><i>Kindy: One supervisor per 4 students</i> <i>PP - 2: One supervisor per 5 students</i> <i>3-4: One supervisor per 8 students</i> <i>5 - 6: One supervisor per 10 students</i> <i>7 - 12: One supervisor per 12 students</i></p> <p><i>This does not include helpers for Special Needs students</i> <i>Final approval of number of supervisors to be made by the Principal</i></p>			
Water-based Excursion			
<p>Closed water:</p> <ul style="list-style-type: none"> • One qualified supervisor for every 32 students or part thereof, and, • For every 12 students or part thereof, there will be one supervisor (inclusive of the qualified supervisor). <p>Open Water:</p> <ul style="list-style-type: none"> • One qualified supervisor for every 16 students or part thereof, and, • For every 8 students or part thereof, there will be one supervisor (inclusive of the qualified supervisor). <p><i>This does not include helpers for Special Needs students.</i> <i>Final approval of number of supervisors to be made by the Principal</i></p>			

Number of Supervisors		WWCC #
Name of Qualified Supervisor(s)	Mobile #	
Name of Supervisor 1	Mobile #	
Name of Supervisor 2	Mobile #	
Name of Supervisor 3	Mobile #	
<i>If there are more supervisors, provide names and details on back of form, or on separate list.</i>		
Emergency Response Planning		
Has an emergency response plan been produced? <i>Please attach to this document.</i>	Yes	No N/A
Are contingency plans in place of an emergency? <i>Please attach to this document.</i>	Yes	No
Do all participants know what the emergency signal is?	Yes	No
Do you have a list of names of participating students and their parent/guardian contact numbers? <i>Please attach to this document.</i>	Yes	No
Transport arrangements		
Bus	Hire Bus(es) / Charter Bus(es)	Yes No
Name / Driver		
Train	Yes	No
Private Vehicles	Yes	<i>If yes: attach signed Private Vehicle Use Declaration Forms</i>
	No	
IMPORTANT NOTES REGARDING PRIVATE VEHICLE USAGE:		
If using private vehicles, drivers must have a current license and sign the Private Vehicle Use Declaration form. Completed forms and a copy of the driver's license must be attached to this form.		
<ul style="list-style-type: none"> • Each student must be seated in a seat belt • Students 7 years and under must sit in an approved booster seat. 		
Go to https://www.transport.wa.gov.au/licensing/seats-and-seat-belts.asp for current laws on child car restraints		
Students		
Have parents been notified about the excursion / activity?	Yes	No
If no, when will they be notified?		
Have parents given written consent?	Yes	
	No	If no, when?
Number of 'Yes' Students	Number of 'No' Students	

Arrangements for 'no' students:

Please collect and store consent in a safe place.

When will you brief the Students on:

- Safety
- Teacher Expectations
- Acceptable Behaviour

Any Special Education students coming? Yes No

If yes, who?

What extra care has been taken for them?

Are there any student health needs that need particular attention? Yes No

NOTE: Copies of Health Alerts are to be taken on all excursions.

If yes, list their names below, and action you will take.
If there are more students with health alerts / needs, provide names and details on separate list.

- 1
- 2
- 3
- 4
- 5
- 6

Staff

Are there any health alerts of staff or volunteers attending this excursion that need particular attention? (eg allergic to beestings:) Yes No

If yes, list name, health alert, and actions necessary in case of emergency:

NOTE: Ensure colleagues know what to do in case of medical emergency

Impact on Rest of School		
Does your class' absence impact on other:		
Staff?	Yes	No
School Volunteers?	Yes	No
Students?	Yes	No
Do you have the agreement and co-operation of teachers/classes affected? Yes No		
Who?		
Briefly outline yard duty arrangements: <i>(if applicable)</i>		
Signatures		
Teacher-in-charge		
Principal / Head of School		
Date		

For additional information, the link to the Department of Education excursions policy is below:
http://det.wa.edu.au/policies/detcms/cms-service/download/asset/?asset_id=18644629

Excursion Risk Management Plan

Risk Matrix						
Consequence						
Likelihood		Insignificant	Minor	Moderate	Major	Catastrophic
	Almost Certain	Moderate	High	High	Extreme	Extreme
	Likely	Moderate	Moderate	High	Extreme	Extreme
	Possible	Low	Moderate	High	High	Extreme
	Unlikely	Low	Low	Moderate	High	High
	Rare	Low	Low	Low	Moderate	High

Risk Assessment					
Activity	Hazard Identified	Risk assessment (use matrix)	Elimination / control measures	Who	When

Excursion Risk Management Plan

Risk Assessment (cont)					
Activity	Hazard Identified	Risk assessment (use matrix)	Elimination / control measures	Who	When