



**APPLICATION TO CONDUCT SCHOOL EXCURSION**

**The completed application form must be submitted by the school to the education district director when seeking approval to undertake an educational excursion during a school day or school days. It must be signed by the Principal and the SGB Chairperson.**

1. **DETAILS OF SCHOOL**

|  |  |  |
| --- | --- | --- |
| 1.1 | Education district |  |
| 1.2 | Name of school |  |
| 1.3 | School’s EMIS number |  |
| 1.4 | Name of principal |  |

1. **SCHOOL GOVERNING BODY (SGB) CONTACT DETAILS**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **SGB member** | **First name and surname** | **ID number** | **Contact telephone number** | **Expiry date of term of office** |
| 2.1 | Chairperson |  |  |  |  |
| 2.2 | Secretary  |  |  |  |  |
| 2.3 | Treasurer |  |  |  |  |

1. **PURPOSE OF EDUCATIONAL EXCURSION**

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| --- |
| Objective:  |
| Curriculum linkage:  |
| Indicate whether overnight or day visit: | No. of days: |
| If overnight, describe type of accommodation to be used: |
| Catering arrangements: |

1. **ACTIVITIES OF LEARNERS ON EXCURSION**. (You may use a separate sheet if the space below is insufficient.)

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1. **COMPOSITION OF EXCURSION PARTY**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Number of learners** | **Total**  | **Number of****teachers**  | **Total** | **Number of** **parents** | Total |
| Boys | Girls |  | Male | Female |  | Male | Female |  |
|  |  |  |  |  |  |  |  |  |

1. **NAMES OF TEACHERS AND PARENTS WHO WILL ACCOMPANY THE LEARNERS**

|  |  |  |
| --- | --- | --- |
| **First name** | **Surname** | **Teacher/ Parent** |
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1. **FUNDING ARRANGEMENTS**
	1. COST DETAILS

|  |  |
| --- | --- |
| **Cost of the tour per person:** | **Total cost:**  |
|  |  |
|  |  |

* 1. SUPPORT PROVIDED FOR LEARNERS WHOSE PARENTS CANNOT AFFORD THE EXCURSION

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1. **TRANSPORT DETAILS**
	1. NAME OF THE COMPANY OR PERSON(S) OWNING THE VEHICLE(S):

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| --- |
|  |

* 1. ADDRESS(ES) OF THE ABOVE COMPANY OR PERSON(S):

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| --- |
|  |
|  |
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* 1. ROADWORTHY CERTIFICATE:

|  |  |
| --- | --- |
| **Date of issue:** | **Expiry date:** |
|  |  |
|  |  |

* 1. DETAILS OF DRIVER:

|  |  |
| --- | --- |
| **Name of driver and co-driver:** |  |
| **Driver’s licence(s) and code(s):** |  |
| **Expiry date(s) of professional driving permit(s):** |  |
| **Name of insurance company and policy number:** |  |

1. **ACCOMMODATION ARRANGEMENTS:**

|  |  |
| --- | --- |
| **Type:**  | **Number per room** |
|  |  |
|  |  |
|  |  |
|  |  |

1. **DOCUMENTS TO BE SUBMITTED WITH APPLICATION**

**Copies of the following documents must be submitted with the application:**

* 1. The full excursion itinerary
	2. The letter of invitation ( if applicable)
	3. All the signed parental consent forms
	4. The school’s most recent bank statement
	5. A copy of the minutes of the school governing body meeting at which the excursion was approved
1. **SIGNATURES**

**------------------------------------------- ------------------------------------- --------------------------------**

PRINCIPAL’S NAME (Please print) SIGNATURE DATE

**-------------------------------------------- -------------------------------------- ------------------------------------**

SGB CHAIRPERSON’S NAME SIGNATURE DATE

(Please print)

**FOR OFFICIAL USE:**

**APPLICATION APPROVED BY:**

**-------------------------------------------- -------------------------------------- ------------------------------------**

IMG MANAGER’S NAME SIGNATURE DATE

(Please print)

**-------------------------------------------- -------------------------------------- ------------------------------------**

DISTRICT DIRECTOR’S NAME SIGNATURE DATE

(Please print)