



KCC Education and Libraries

**GOF2**

**Educational Visits and Offsite Activities**

Approval for all visits must be granted before a visit takes place.

This form (GOF2) has been designed to be used by any establishment as its own 'internal' form when seeking approval from the Headteacher/Governing Body/ Area Youth and Community Officer. i.e when LEA approval is not required.

*Please note: I) If the visit includes Adventurous Activities and /or an overnight stay (residential) the form GOF1 must be completed and submitted to the Outdoor Education Unit. Ii) Approval from the Headteacher/Governing Body/ Area Youth and Community Officer will not be granted without the 'Pre Check' being carried out.*

*If a completed GOF1 is attached to this form , the sections in the boxed grey areas do not need to be completed.*

**Pre check completed on (insert date) \_\_\_\_\_**

**GOF1 attached**

**Yes/Not applicable**

Name of School/Unit/Youth Centre: \_\_\_\_\_

Tel No: \_\_\_\_\_ Fax No: \_\_\_\_\_ E mail: \_\_\_\_\_

Name of Leader i/c the visit: \_\_\_\_\_

Contact details if different to above: \_\_\_\_\_

Name of Assistant Leader: \_\_\_\_\_

**Section B - Details of proposed visit**

Destination or places to be visited: \_\_\_\_\_

\_\_\_\_\_ Country(ies): \_\_\_\_\_

Date - Outward journey: \_\_\_\_\_ Return journey: \_\_\_\_\_

**Purpose of Visit/Educational Value**

**Transport and Travel**

Mode(s) of transport: \_\_\_\_\_

If using Minibus with own drivers please state distance to destination (one way) \_\_\_\_\_

\_\_\_\_\_miles/kms and complete section below:

Name of Driver	PCV licence Yes/No	Holder of KCC Approved Minibus Drivers Permit. Yes/No	Driving Licence checked to meet KCC regulations

Name(s) of tour/travel operator or company to be used: \_\_\_\_\_

\_\_\_\_\_ Tel No: \_\_\_\_\_

**Activities:**

Please list all non adventurous activities proposed: \_\_\_\_\_

\_\_\_\_\_  
*All adventurous activities proposed – see GOF1*

If the programme activities are being led/carried out by a Centre/Providers' staff please complete the following section:

Name of Centre/Provider(s): \_\_\_\_\_

Address: \_\_\_\_\_

Tel No: \_\_\_\_\_ E-.mail: \_\_\_\_\_

Date(s) of Pre Visit to the venue(s) : \_\_\_\_\_

If activities are being led /carried out by your own staff please complete the following table:

Activity	Name of members of staff leading activity	M/F	Any activity qualification held relevant to the venture	Date obtained/ updated

List of teaching staff, volunteers or other responsible adults who will have a supervisory role during visit.

Name	M/F	Status.(Parent/Governor/Volunteer) Relevant experience/qualifications inc First Aid	Expiry dates (where appropriate)

**Insurance Arrangements:** The visit is covered by (please circle)

KCC Insurance. Other Insurance

If other, name Insurance company: \_\_\_\_\_

Please attach the following to this form;

- an outline programme of visit with this form - a brief daily programme for morning/afternoon and evening including activities, areas to be visited.
- an accommodation plan showing bedrooms allocated to group including staff rooms

**Visit Leader request for Approval**

I confirm that the visit will be arranged in accordance with the LEA's policy and that written risk assessments have been carried out and will be referred to and followed in respect of this visit.  
Consent forms and Medical consent forms will be obtained from all participants and will be carried by the Leader throughout the visit.

Name:  
(Please print)

Signature:

Visit Leader

Date: \_\_\_\_\_

**Headteacher/EVC/Governors/Area Youth and Community Officer Approval**

This approval confirms that I consider the visit to have significant educational value and that the arrangements are in accordance with the appropriate County regulations including KCC Safe Practice of Offsite Activities (CD) and the KCC Minibus Safety Code of Good Practice.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Headteacher/EVC/Area Youth and Community Officer

Comments:

Governing Body representative (if required)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Youth and Community use only – Visits Abroad*

**International Officer Approval**

Approval has been given for the above visit abroad to take place, subject to any limitations outlined as follows.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments/Limitations