School-Related Student Day Trip and Overnight Trip Request Forms

THIS FORM MUST BE SUBMITTED TO THE PRINCIPAL TWO (2) WEEKS PRIOR TO THE TRIP. IF BOARD APPROVAL IS REQUIRED, THE BOARD MUST RECEIVE THE FORM AT LEAST TWO (2) TWO WEEKS IN ADVANCE OF TRIP

Information				
1. Sponsor's Name Therril	Janner	Club or Dept	Migran	ナ
2. Name of all chaperones 5he	ernil Tanni	en, Andy	Corbin, J	ason
Doyle, Cindy Sasse	, Toudy wh	a) Engen	ia Mono	les
3. Where will the group be going	? Kentucky	Dan W	llage	
4. Purpose of the trip Migrae	st camp	to Norease	English,	Math SKill
*If the trip is a State Competit	tion Trip, meals will	be reimbursed at a	daily rate of \$40.	00, and must be
accompanied by receipts.	11/16 to //on/	19 Departure Tir	ne 2:30 A	m
5. When is it to be held? Date	KY 17 10 6/2//		vel Time Bu	- & Oriver W
6. City Orathery: 11e	State Ky		tance (Round trip	8
 Place of overnight lodging (na 	•			
Kentacky Dam vill		10.72	ages	
8. Identify students by name (use	attached sheet, if no	ecessary) Have	a 115t	- of
15 Students (Mi			* 40 4	
Costs Baid By Re			ogram	
9. Cost to students			~ ~	0
10. Describe the relevance of the	rin educational cul	tural, etc./education		
will work on En	alich SKills	reading	math 15	cience
WILL ON DIS	7113-1 2/11/15	, , , ,	7-10	
11. Other activities planned To	a to IBL			
12. How will this trip benefit your			w to wan	KiN
Small groups to	i alc negs	ENGLISH	SKILLS	
13. Type of transportation used _	Webster	aunty B	W.5	
14. Have trip permission slips bee		,		leader?
	NO, indicate why:) p = = = = =		
10 1	11/20/10			
Sponsor's Signature	<i>9/1//19</i> Date	Principal's Signatur		Date
Sponsor's Signature	Date	i imorpai s orginatur		Butto
Trip has been □ approved □ disappro	ved. Reason for disapp	proval		
Signature of Superintendent/D	esignee	Date	Board A	pproval Date

RELATED PROCEDURES:

09.36 AP.211, 09.36 AP.212

Review/Revised: 2/18/13