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.

Ini	FORMATION
1.	Sponsor's Name Sherril Janner Club or Dept Migrant
2.	Name of all chaperones Sherri) Tanner, Jason Doyle, Jesus Ariza
A)	athan Janner, Marlena Starks, Eugenia Morales, Cindy Sasser
3.	Where will the group be going? Murray State University
4.	Purpose of the trip To work on College & Career Readines 5
5.	*If the trip is a State Competition Trip, meals will be reimbursed at a daily rate of \$40.00, and must be accompanied by receipts. When is it to be held? Date 6/15/19 Departure Time
	Estimated Travel Time 2 Hours
6.	City Murray State K Estimated Distance (Round trip) 200 m.
7.	Place of overnight lodging (name, address & phone #) Clark Hall (Norm) MSU
8.	Identify students by name (use attached sheet, if necessary) 12 5th dents (High School)
(costs to be paid by regional Mignent program
	Cost to students Cost to school organization Cost to Board
	Describe the relevance of the trip: educational, cultural, etc./educational activities
	Students will work on college readiness and
	explore careers of interest
11.	Other activities planned 5tudy and Debate each other
12.	How will this trip benefit your students? Help prepare fore College
	Type of transportation used Webster Co Bus
	Have trip permission slips been signed and are they in the possession of trip sponsor or leader? Yes No If NO, indicate why: They are 5111 being Selected
	Plant Tomas 4/13/19
Spo	onsor's Signature Date Principal's Signature Date
Trip	o has been □ approved □ disapproved. Reason for disapproval
	Signature of Superintendent/Designee Date Board Approval Date

RELATED PROCEDURES:

09.36 AP.211, 09.36 AP.212

Review/Revised: 2/18/13