



Board Agenda Item Request: Student Overnight Travel Form

Please email completed form to Superintendent

1. Group or organization making the travel request:

2. Date of travel: _____

3. Purpose of the trip/event being attended:

4. Number of students attending: _____

5. Is this a coed event? Yes No

6. Is overnight stay required? Yes No

If so, what are the arrangements? _____

7. What is the cost for the event and how are the expenses being covered? _____

If this is a coed event, you must have at least one female and one male chaperone attend.

8. How many chaperones are going? _____

9. Please list chaperone names : _____

10. Which form of transportation is requested?

School Bus Activity Van Charter Air Travel Parent Transport

Other: _____

11. Principal Signature: _____