

EDUCATIONAL TRIP REQUEST

Student's Name

Grade

Dates of Educational Trip: _____

Destination: _____

I am requesting an Educational Trip for the following educational reasons:

Parent or Guardian Signature

Date

FOR SCHOOL USE ONLY

Total Absences _____ Failing Grades: _____

APPROVED _____ **UNAPPROVED** _____

Principal's Signature

Date

STUDENT EDUCATIONAL TRIP: Students must see their teachers prior to their trip to make arrangements for work that will be missed. A journal concerning the activities of the trip must be submitted within 5 days after the trip. A maximum of 7 days per year will be permitted for educational trips.

