

**EXTENDED TRAVEL REQUEST  
DAVIS SCHOOL DISTRICT**

School:	<input type="text"/>	Date of Request:	<input type="text"/>
Group requesting trip:	<input type="text"/>	Number of students in group:	<input type="text"/>
Instructor(s):	<input type="text"/>		
Destination:	<input type="text"/>	Departure Date:	<input type="text"/>
		Return Date:	<input type="text"/>
Reason for trip:	<input type="text"/>	Number of days students will be absent:	<input type="text"/>
Method of travel (to and from destination and at location):	<input type="text"/>		
Adults who will be accompanying group:	<input type="text"/>	Ratio of Students to Adults:	<input type="text"/>
Last time this group traveled out-of-state, include date and destination:	<input type="text"/>		
Describe the educational value of this trip. Can the educational value be met in any other way?	<input type="text"/>		
Cost per student \$	<input type="text"/>	Insurance coverage:	<input type="text"/>
Signature of Sponsoring Instructor:	<input type="text"/>		Signature of Sponsoring Principal:
<input type="text"/>			

<b>FOR DISTRICT USE ONLY</b>			
Signature of School Director:	Reason(s) for rejection:	<b>DATES:</b>	
	<input type="checkbox"/> Parent Survey missing	Received:	
	<input type="checkbox"/> Exceeds District Allotment	Authorized:	Rejected:
	<input type="checkbox"/> Other _____		

**Attach copy of parent survey results, a detailed cost breakdown, and a trip agenda**