

## **Student Travel**

Form must be signed by the Sponsor and approved by the Principal/Director. Be sure to attach the completed form with all supporting documentation including the list of those attending to the requisition. The District's Travel Specialist will review before requisitions will be processed.

				Rev. 7/2023
ponsor Name:		Today's Date:		
Organization/Class:		Campus:		
Name of Event:				
Location of Event:		Date(s) of Event:		
Number of Students Attending*: * ATTACH A LIST OF NAMES		Number of Adults Attending*: *ATTACH A LIST OF NAMES		
Mode of Transportation: Bus	Suburban	Rental Vehicle	Charter Bus	Air
Lodging (Name and Address of Hotel):				
Estimated Lodging Expense:				
Student Per Diem (enter the number of each belo Breakfast @ \$6.00 Lunch @ \$9.00 Dinner	ow): @ \$13.00	Total Student Per Diem :	Hard Co \$	py Check
	Campus I	nformation		
Method of Payment for Trip:				
Estimated Total Cost of Trip:	Amount to be raised by Students:			
Methods of Fundraising:				
Approval Signat	ures - <i>Stan</i>	nped signatures not accept	ted	
Signature of Sponsor (Person Requesting Trip)			Date	
Signature of Department Head			Date	
Principal/Director's Signature			Date	
Assistant Superintendent's Signature (Only required for out	of state travel)		Date	