



Educational Trip Request Form

Please return the completed form to the building principal five (5) school days before the first day of the planned trip.

A student is permitted to participate in family educational trips during the school year totaling five (5) schooldays, including Take Your Child to Work Day. No single trip may exceed five (5) school days; additional days will be unexcused. The student's absences will be considered excused if parents or guardians follow the requirements below.

- A parent may not assume an educational trip has been approved until this form has been fully completed, submitted to the principal five days prior to the beginning of the trip, and returned to the parent/guardian.
 - Parents/guardians should avoid educational trips during the first five (5) days and the last five (5) days of the school year.
 - Schoolwork missed because of an approved educational trip is the responsibility of the student. The teacher will accept schoolwork that is completed and submitted within five (5) days of returning from the trip. Any schoolwork submitted more than five (5) school days after returning from an educational trip will not be accepted.

If a parent or guardian selects to have their child participate in an educational trip without prior administrative approval, the absence(s) will be considered unexcused or unlawful. Academic work may not be made up during an unexcused / unlawful absence.

Student(s) Name: _____

Grade Level(s): _____

Teacher / Homeroom / First Period Class: _____

Parent / Guardian Name: _____

Phone Number: _____

Address: _____

Number of days to be absent from school: _____

Dates of absences: _____ to _____

Trip destination: City: _____ State: _____

Sites(s) of interest/educational value of the trip: _____

Parent /Guardian signature: _____ Date: _____

Documented Attendance

Current school year: _____

Excused absences: _____ Unexcused absences: _____

Excused Tardy to school: _____ Unexcused tardy to school: _____

Previous Educational Travel This School Year

Location: _____

Date(s): _____

Request acceptance:

Approved: _____ Disapproved: _____

Reason for disapproval: _____

Principal signature: _____ Date: _____

Copy - Parent

Original — Cumulative file