

Exhibit A—Request for Trip Approval

Date of request: _____

Date/time of departure: _____ a.m. or p.m. (*circle one*)

Date/time of return: _____ a.m. or p.m. (*circle one*)

Destination of trip: _____

Purpose of trip, i.e., event to be attended, instructional value of the trip:

Estimate of any permissible fees associated with the trip: _____

District employee sponsor and organization: _____

Number of students participating: _____

Number of chaperones participating: _____

Name of Chaperone	Criminal History Check Requested (<i>circle one</i>)
	Yes No
	Yes No
	Yes No

Signature of District employee sponsor: _____

For Office Use Only

School-sponsored trip:

Approved

Denied

Reason, if denied:

Chaperone approval or denial:

Name of Chaperone	Criminal History Check Completed (circle one)	Decision (circle one)
	Yes No	Approved Denied
	Yes No	Approved Denied
	Yes No	Approved Denied

Principal's Approval: _____
(Signature) (Date)

Superintendent or
Designee Approval: _____
(Signature) (Date)

Board Approval: _____
(Signature - Required for Out-of-State Travel) (Date)