



CARBONDALE AREA SCHOOL DISTRICT

Major Trip Athletic and Student Activities Application

All areas are to be completed and answered in full. If more explanation is needed, provide an attached sheet. Follow policy in working to determine if the trip is within guidelines. Make sure all signatures at the building level are secured before sending the application to the Superintendent of Schools.

Print, type, or fill-out all information. Attach additional pages if needed.

Name of person(s) making the request _____ Date _____

Position _____

Name of School _____

Activity Name _____

Dates of planned trip _____ Dates of last trip (if applicable) _____

Destination _____

Number of school days missed _____ Number of students going _____

Total cost per student for trip \$ _____ How much of this cost will the student pay \$ _____

ESTIMATED COSTS

Do the above costs include food?	☐ Yes	\$ _____	☐ No
Do the above costs include lodging?	☐ Yes	\$ _____	☐ No
Do the above costs include a registration fee?	☐ Yes	\$ _____	☐ No
Are there any additional costs (if yes, list them below)?	☐ Yes	\$ _____	☐ No

SUBSTITUTE NEEDED _____ **YES** _____ **NO** _____

DATE NURSE WAS NOTIFIED _____ **NURSE INITIALS:** _____

CHAPERONES

Professional Staff Member(s) – List each staff member below, write none if applicable

Support Staff Member(s) – List each staff member below, write none if applicable

Extra Duty Staff Member(s) – List each staff member below, write none if applicable (include outside agency staff)

Parent(s)/Volunteer(s)** – List each parent/volunteer below, write none if applicable

Total Number of Chaperones** _____

**** Chaperones must be secured who meet the District's Volunteer Guidelines. Chaperones that do not have the proper clearances may not go on this trip. Check with your principal. Also, make sure that you have a sufficient number of chaperones as per District guidelines.**

Major Athletic and Student Activity Trip Eligibility

Please Initial:

_____ **As per the revised Major Trip Guidelines, all students will be checked for eligibility in compliance with the PIAA Constitution and By-Laws for High School Athletic Eligibility. This includes athletic and non-athletic trips.**

Trip Plans and Educational Focus

Purpose of Trip (What do you hope to gain by taking this trip? How will this help your students and what will they learn/gain)?

☐ **Attach** an itinerary of what will be done on this trip. **Include departure times and return times and the schedule of events in which the students/organization will be involved.** A complete listing of how the time is to be spent while away from school must be included. If there is "free time", it may be listed as such. This early in the process it is understood that these may change, but provide as much detail as possible.

How will the success of the trip be evaluated? (This should come out of and be directly related to the purpose for going. Example: As a result of this trip my students will be able to.... (or) As a result of this trip the students will gain ...)

Additional Logistical Information

How is this trip being funded? (Who is covering the cost for the student)?

If students are paying all or part of the cost, how are they funding this trip?

If another organization is funding this trip, please provide the name and describe the extent to which they are covering this cost.

If this is a major trip that requires an overnight stay, where will the students be staying?

How are you going to travel? (bus (district or charter), van (district or charter), plane, train, private car).

If approved by the Board, are there any reasons, short of an emergency that you would choose to cancel this trip? (please explain)

Board Presentation Requirement

Pending Board approval, you will be notified of the requirement to provide a report following your scheduled trip(s) to share the benefits of the experience.

Please initial below that you agree to the requirement.

Initial	Date
:	:
_____	_____

**Major Trip Athletic and Student Activities
Approval Page**

Signature – person requesting trip

Date

Signature – Athletic Director, if applicable

Date

☐ Approve
☐ Disapprove

Signature – Building Administrator

Date

☐ Approve
☐ Disapprove

Administrator, please provide reasons supporting your decision:

Building Administrator should ensure all required paperwork is completed accurately and in its entirety before submitting it to the Superintendent for approval.

ADMINISTRATION USE ONLY

Signature – Superintendent

Date

☐ Approve
☐ Disapprove

Board Notification Date

OR Board Action (if needed):

☐ Approve
☐ Disapprove