



Student Travel Request

Use this form for any student trip you attend that is not organized by a curriculum coordinator or athletic director.

Application Date: _____

Name of Trip Sponsor: _____ Name of Event: _____

School(s) and group Participating: _____

(all potential buildings that could have students traveling on trip)

Nature of Travel: ☐ Athletics ☐ Academic ☐ Due to Qualifying Event ☐ Other: _____
(please select one) (please attach additional info to explain)

Date(s) of Travel: _____

Location: _____

Sub Required? ____ Yes ____ No ____ Full day ____ Half Day AM ____ Half Day PM

Prearranged Sub Name (if applicable): _____

Estimated Costs:

Number of sub days:	_____ X \$158.75 =	\$ _____
Lodging:	_____ X \$ _____ =	\$ _____
Meals: *Meal reimbursement cannot exceed \$35 per day for staff members	_____ X \$35 =	\$ _____
Registration Fee (if any):		\$ _____
Transportation:	Bus: \$ _____	Total cost for transportation: \$ _____
	Air: \$ _____	
	**Rental car: \$ _____	
	Parking: \$ _____	
	Mileage: _____ miles X \$0.55 per mile = \$ _____	
**Expenses for rental vehicles will not be reimbursed without prior approval of the Director of Business Services. The district will not assume any liability for damages to rental vehicles under any circumstances. Rental Car Approval: _____ Director of Business Services Signature _____		Grand Total: \$ _____

Signature of Applicant: _____

Date: _____

BUDGET MANAGER SHOULD COMPLETE THE SECTION BELOW AND THEN ALL PARTIES SIGN:

Funding Source:	Key	Object	Amount:
☐ ECA Account			
☐ Grant			
☐ Paid by school			
☐ Paid by another department			
☐ Other			

Signature of Budget Manager: _____

Date: _____

Signature of Supervisor: _____

Date: _____

Stop here if your trip is not overnight and the total cost is less than \$10,000.

IF YOUR TRIP REQUIRES OVERNIGHT TRAVEL OR EXCEEDS \$10,000 IN TOTAL COST, ADDITIONAL APPROVAL IS REQUIRED:

1) In this case, please send this form to the Executive Director of Curriculum and Instruction for final approvals:

2) Also include when sending:

- a) Attach a written description (one or two paragraphs) explaining how the proposed travel is related to program or district goals. Include any proposed and or expected funding sources and how you will ensure that any student with an applicable investment can participate in the travel. Attach any additional supporting documents, data and itineraries.

Approved? ____ Yes ____ No

District Travel Coordinator Signature: _____

Date: _____

CFO or Director of Business Services Signature: _____

Date: _____

Chief Schools Officer Signature: _____

Date: _____