Reardan-Edwall School District
Overnight Trip Request Form

All overnight student trips require pre-approval. Please submit your completed form to the building principal at least 30 days in advance of your planned activity.

Group: _____

Advisor/Coach: _____ Cell Phone: _____

Date of Trip: _____

Destination(s): _____

Purpose: _____

Number of Students: _____ Grade level(s): _____

Chaperones: (1 per 10 student ratio) _____

_____

Instructional Purpose: _____

_____

Are appropriate purchase orders submitted? _____ YES _____ NO

Has transportation been requested? _____YES _____ NO

Have substitute arrangements been completed? _____YES _____ NO

(Office use only)

Approvals

Principal: _____ Date: _____

Superintendent: _____ Date: _____

Board Chair: _____ Date: _____