BEDMINSTER ELEMENTARY SCHOOL
2914 Fretz Valley Road, Perkasie, PA 18944
(tel) 215-795-2929 (fax) 215-795-2156

Educational Trip Form

_____ _____
(Student's Name) (Teacher/Grade)

_____ _____
(Student's Name) (Teacher/Grade)

_____ _____
(Student's Name) (Teacher/Grade)

_____ _____
(Student's Name) (Teacher/Grade)

Will be absent from school on_____

To participate in an educational trip to _____

_____
Signature of Parent(s)

During such trips, the student is responsible to make up all work during his/her absence from school. He/she will be prepared to take any missed tests during the first three days upon returning to school. Due to possible changes in classroom instruction, we will wait until your child/children return from their educational trip to receive missed work. If you would like to have your child/children do something academically on their trip, have them keep a dairy or reading journal that they might want to share when they return.

It is important to note that regular school attendance is essential to the successful completion of any educational program. Pennsylvania law states, "A maximum of ten days of cumulative lawful absences *verified by parental notification* may be permitted during a school year. All absences beyond ten cumulative days should require an excuse from a physician.

Thank you for your cooperation in this matter.

Mrs. Anita Whalen
Principal

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Please note, as of _____ , by taking this trip

_____will have _____ additional days of absence and then a doctor's note will be required
(Student's Name)

_____will have _____ additional days of absence and then a doctor's note will be required
(Student's Name)

_____will have _____ additional days of absence and then a doctor's note will be required
(Student's Name)

_____will have _____ additional days of absence and then a doctor's note will be required
(Student's Name)