

**IMPORTANT: This form must be properly filled out and APPROVED at least FOUR (4) WEEKS before ALL OVERNIGHT or OUT- OF-STATE TRIPS.**

**Complete the form and submit to your Admin Secretary III for site and Governing Board approval.**

SCHOOL: \_\_\_\_\_ SUBMITTED BY: \_\_\_\_\_

WHO IS TRAVELING: \_\_\_\_\_

EVENT NAME\*: \_\_\_\_\_

LOCATION: \_\_\_\_\_ \*I Will Not Attend Sessions on CRT or SEL  ✓  
 \*Students will not attend/participate in any water related activities.  ✓

DATE(S):	Departure: (Day/Date)	Return: (Day/Date)	# Of School Days Missed:
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# of STUDENTS:	Total #	Male:	Female:	
# of ADULTS:	Total #	Male:	Female:	

Chaperones – Field Trip Procedures \_\_\_\_\_ Names(s) of teacher/sponsor (min. of 2 required) \_\_\_\_\_

STUDENT CONTRIBUTION: \$ \_\_\_\_\_ Student contribution not to exceed: \$600 (9-12); \$300 (K-8)

TOTAL COST: \$ \_\_\_\_\_ SUBSTITUTE REQUIRED:  YES  NO

**Educational purpose and/or objective in connection with adopted curriculum and Arizona State Standards:**

ALL ESTIMATED COSTS	Paid by: Tax Credit, Club, PSO, Student Activities, G & D, Student Contribution, CTE etc.	Travel will be by:
Registration: \$	(List funding sources by title)	<input type="checkbox"/> White Bus <input type="checkbox"/> School Bus
Lodging \$		<input type="checkbox"/> Air <input type="checkbox"/> Charter Bus
Transportation \$		<input type="checkbox"/> Other:
Meals: \$		Comment:
Other (Entertainment): \$		
Substitute Fee: \$		

**APPROVALS**

**Principal:** \_\_\_\_\_  Approved  Denied **Date:** \_\_\_\_\_

**Admin/Director:** \_\_\_\_\_  Approved  Denied **Date:** \_\_\_\_\_

**Asst. Superintendent:** \_\_\_\_\_  Approved  Denied **Date:** \_\_\_\_\_

**Board Agenda Date:** \_\_\_\_\_

\*Attach relevant documentation to facilitate the approval process including event brochure, hotel and meal plan, itinerary, etc.  
 Revised 07/08/2024