

# Administrative Procedure 733 – Appendix A

## STUDENT TRAVEL REQUEST FORM

School: \_\_\_\_\_

Group Information:	Grade: _____	Number of Students: _____
	Grade: _____	Number of Students: _____
	Grade: _____	Number of Students: _____

Teacher Leader: \_\_\_\_\_ Substitute Leader: \_\_\_\_\_

Total Number of Chaperones (including leaders): \_\_\_\_\_

Destination(s):

\_\_\_\_\_  
\_\_\_\_\_

Departure Date: \_\_\_\_\_ Return Date: \_\_\_\_\_

Number of instructional days involved (maximum of 5): \_\_\_\_\_

Businesses and funds owed to each if the trip is cancelled (e.g. tour operators, transportation companies, hotels, etc):

\_\_\_\_\_  
\_\_\_\_\_

Estimated Budget: Attach showing major revenues and expenses \_\_\_\_\_

Curricular Connections: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Pre and Post Travel Educational Activities: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Parents/Guardians, students and chaperones have been informed in writing that the trip may be cancelled by the Director or designate at any time prior to or during the trip:

Parent/Guardian Consent Forms on file at school:

Student and Chaperone names on file at the school:

Chaperone names and their relationship to the school(attached):

Expectations/Responsibilities for Chaperones (attached):

Medical needs of students are with the Teacher leader and on file at the school:

Budget showing major revenues and expenses (attached):

Contact number for Teacher and Substitute leader during trip on file with principal(attached):

Approval granted (Superintendent signature required for out-of-province trips):

_____	_____	_____	_____
Principal	Date	Superintendent	Date