FAMILY TRIP REQUEST FORM

PERSONAL DATA:

Name: __________________________ Grade: ____ Homeroom Teacher: ______________________

Address: ____________________________________________

Phone: __________________________

TRIP INFORMATION:

Destination: __________________________________________ # of School Days Absent: _______

Date Leaving: ______________________ Date Returning: ______________________

Educational Value of the Trip:

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

TRIP FORM MUST BE RETURNED TO THE OFFICE 48 HOURS PRIOR TO THE TRIP.

Parent Signature: __________________________

Teacher Signature: __________________________

Principal Signature: __________________________

Excused Absence: ______ Unexcused Absence: ______

FOR REQUESTS THAT ARE NOT EXCUSED, THE TEACHER AND PARENT WILL BE NOTIFIED

WHERE EDUCATIONAL EXCELLENCE IS A TRADITION
National Blue Ribbon School 2011

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