## **PCSD Application for Overnight Student Travel**



4006 F1

Provo City School District							
Application For Overnight Student Travel							
All trips must be submitted AND approved at least 60 calendar days prior to departure.							
Name of School:							
Group Requesting Trip:							
Advisor/Coach/Teacher:							
Destination:					[	Distance fr	om Provo:
Dates of Trip:	Dates of Trip: Departure Date:			F	Return Date:		
Number of School Days Missed:			(N	(NOT to exceed 2)			
Number of Students in Group:	F:		M:		Total:		
Number of Adult Supervisors:	F:		M:		Total:		(minimum ratio 1:10)
Did You Send and Receive Parent Consent for Each Participant? Y[] N[]							
Most recent travel: Destination					Date:		Cost:
Anticipated Costs per Student							
(If no amount is being collected for a particular category, please enter \$0)							
Transportation: \$ Loc	dging	ging: \$			Food	d: \$	
Registration Fee: \$ Ot	her:	er:\$					
Estimated Cost Per Student*: \$							
Less Amount Per Student from Fundraiser:	-\$						
Estimated Maximum Cost Per Student: =\$			(total student out of pocket)			out of pocket)	
* The total prior to fundraising may not exceed \$2000.00 per student.							
Itinerary, transportation, fundraising, and lodging plans are described in detail on attached forms.							
Y[ ] N[ ]							
You must include all methods of travel used on the trip.							

Parent Meeting to Discuss Trip Plans

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Date of Parent Meeting:						
Number of Parents Approving the Trip:		Only One Vote Per Student				
Number of Parents Opposing the Trip:						
Total Number of Students in Group:						
Approval %						
Have parents signed the consent form? Y[] N[], but they will prior to travel						
Plan has been made with the Principal for fee waived student:						
Alltrips must be approved 60 days before travel. Exceptions will be approved only when an invitation to a national event or national competition occurs outside of the 60-day deadline. If an exception is requested, a letter from the principal is required.						

This request will not be considered for approval without complete answers to the following questions. Be specific and answer ALL parts of each question:

\*\*If you have handouts that you have provided to parents that clearly address each of these areas, you may attach these documents to this request.

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<b>Educational Justification:</b> What are the educational objectives of the trip? Can these object be replicated with closer, less expensive travel? Why not? Please be specific.	ives
Standards for Participants: What are the academic and behavioral standards that must be by participating students? How were students and parents notified of these requirements	
<b>Safety:</b> In what ways will you ensure the safety of students while traveling or participating in activities? Describe special instructions to students, supervision guidelines to chaperones, accommodations that are specific to the destination.	
<b>Financial:</b> As a school-sponsored activity, fee waivers apply. How will you cover the potential costs of fee waivers or are you expecting the district to offset these costs? What specific fundraisers do you anticipate you will use to offset student costs? Have these fundraisers been approved by your principal with appropriate approval paperwork completed? Attach paperwork.	
Optional: Please provide details of any additional information that you feel is pertinent.	
I have read and I agree to comply with all the stipulations contained in PCSD Policy 4006.	

Initial here:

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## **Board Meeting Approval Date (if required):**

Advisor's Signature	Date	Principal's Signature	Date
Superintendent's Signature	Date	Board President's Signature	Date

Special Conditions that must be met before Superintendent or Board Approval is granted: