## REQUEST FORM FOR OVERNIGHT OR OUT-OF-STATE FIELD TRIPS

This form must be completed by the trip supervisor and returned to the appropriate school administrator at least <u>four</u> weeks in advance of the trip. NOTE: The SuperIntendent has the authority to approve trips that occur before the next scheduled School Board meeting.

All applicable items must be completed before submitting to the appropriate school administrator.

XWest Lafayette Junior-Senior High School	Destination
Cumberland Elementary	Destination
Happy Hollow Elementary	Destination
Date of Request 2/21/2022 Beginning an	nd Ending Dates of Trin 2/25 - 2/26
Signature of Supervising Staff Member Char	2 Dillon Organization We Swim loach
Administrators' approval Januel 5	2 2 / 2020
TRIPIN	NFORMATION
Destination of Trip (be specific)	olis. IN
Trip will be (Circle one or both)	•
Reason for Trip THJAA 3.73 Sm	om Dive Championships
Number of instructional minutes lost 12 feam Describe the specific educational goal(s) or state attain.	(119 Ainstell per swimmer) e standards that this activity will help students
Describe how this activity will help attain school	improvement goals.
Describe why this activity cannot occur without i	interrupting the instructional day
N/A su attacked	schedule
For overnight trips: Describe why this activity cal	
> WL MI	nnot occur without an overnight stay. Μίλης
City/Yellow bus Method of Transportation: <b>知神は</b> (es)	Driver