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 four 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.

__X__ West Lafayette Junior-Senior High School — Destination Chesterton, IN

_____ Cumberland Elementary — Destination _____

_____ Happy Hollow Elementary — Destination _____

Date of Request 5/31/22 **Beginning and Ending Dates of Trip** 8/2 - 8/4 2022

Signature of Supervising Staff Member [signature] **Organization** Athletics Dept./Cross Coun

Administrators' approval [signature] **Date** 5.31.2022

TRIP INFORMATION

Destination of Trip (be specific) Chesterton, IN

Trip will be (Circle one or both) Overnight Out-of-State

Reason for Trip

Team Camp - Cross country

Number of instructional minutes lost 0

Describe the specific educational goal(s) or state standards that this activity will help students attain.

Describe how this activity will help attain school improvement goals.

Foster community & extra-curricular excellence

Describe why this activity cannot occur without interrupting the instructional day.

N/A

For overnight trips: Describe why this activity cannot occur without an overnight stay.

Distance

Method of Transportation: Mini bus(es) 3 Driver(s) D. Joest, C. Williams, M. Joest
City/Yellow bus ____ Driver _____
Charter ____ Charter company _____