

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.

West Lafayette Junior-Senior High School Destination _____
 Cumberland Elementary Destination _____
 Happy Hollow Elementary Destination _____

Date of Request 2/7/2024 Beginning and Ending Dates of Trip 2/9 - 2/10/2024
Signature of Supervising Staff Member _____ Organization WL Swim/Dive
Administrators' approval J. T. [Signature] Date 2/7/2024

TRIP INFORMATION

Destination of Trip (be specific) Indianapolis, IN

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

Reason for Trip IHSAA State Swim Meet

Number of instructional minutes lost 8 participants will be released after 4th period on Friday.

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.

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.

- attached schedule

Method of Transportation: Mini bus(es) Driver(s) Kari Huchstep
City/Yellow bus _____ Driver _____
Charter _____ Charter company _____