Sonora Union High School District 100 School Street, Sonora CA 95370 || Phone (209) 532-5511 x111 || Fax (209) 532-4513

OUT OF STATE/OVERNIGHT TRAVEL Field Trip Request Form

Board Policy/Administrative Regulation 6153 Instruction: School-Sponsored Trips stipulates, "All trips involving out-of-state or overnight travel shall require the prior appoval of the Superintendent. Completed request forms shall be submitted to the site principal for initial review in a timely fashion. The site principal shall then submit the completed forms to the Office of the Superintendent. Out-of-state and overnight trips require a considerable amount of pre-planning. It is the general expectation of the District that such requests will normally be presented to the Superintendent for consideration in June and January.

Request submitted by			
Sponsoring group			
Date request submitted to Principa	ıl		
Type of Trip (check)			
Date(s) of Trip (inclusive of departur	e and arrival) From	To	
Estimated Departure Time	Estimated Return Time	(X:XX AM or PM)	
Destination			
Purnose of trin			
Number of students participating			
Name of CERTIFICATED STAFF MEMBER who has overall responsibility for supervising trip			
Names of OTHER CERTIFICATED	STAFF MEMBERS who will serve as	chaperones	
Number of non-staff (volunteer) adult chaperones (All volunteers MUST have fingerprint and TB clearance IN ADVANCE.)			
Lodging Information (if applicable)			
Name of lodging facility			
Address of lodging facility			
Telephone number of lodgi	ng facility (include area code)		
Mode of Transportation O Airl		UST be approved by Transportation Director IN ADVANCE nce and additional forms at District Office.)	
Estimated total cost of trip			
Describe how cost of trip is	defrayed, including transportation	costs.	
Principal's Approval	Date		
Superintendent Action: OApp	roved ODenied Signature	Date	