



Request for Overnight Trip

(See NPUC Education Code 1608:88)

SCHOOL	GRADES TAKING TRIP	
DATES OF TRIP	NUMBER OF STUDENTS	
MODE(s) OF TRANSPORTATION	NUMBER OF ADULT SUPERVISORS	
LIST 1) ALL ADULTS ATTENDING, 2) IF A VOLUNTEER INFORMATION MINISTRY FORM HAS BEEN COMPLETED, 3) IF BACKGROUND CHECK COMPLETED		
NAME	VIM FORM COMPLETE	BACKGROUND CHECK
1)	YES NO	YES NO
2)	YES NO	YES NO
3)	YES NO	YES NO
4)	YES NO	YES NO
5)	YES NO	YES NO
ITINERARY OF TRIP		
HOUSING FOR STUDENTS		
EDUCATIONAL GOALS OF TRIP		<input type="checkbox"/>

THIS REQUEST HAS BEEN APPROVED BY THE PRINCIPAL AND SCHOOL BOARD			
_____	_____	_____	_____
Principal Signature	Date	School Board Chairperson	Date

THIS REQUEST HAS BEEN APPROVED / DENIED BY THE K-10 BOARD OF EDUCATION			
K-10 Board of Education Notified via:			
_____	_____	_____	_____
Director of Education	Date	Email Meeting	Date: _____