

Lansing Central School District Overnight Trip Request Form

School:

Group Name:

Advisor:

Day/Date Leaving:

Time Leaving:

Date/Date Returning:

Time Returning:

Destination:

Total Miles:

Number of Students Attending:

Number and Names of Chaperones Attending:

Note: there must be same-gender chaperones available for all trips. The general guideline is one (1) chaperone for every ten (10) students)

Number of Instructional Days Missed:

Background Information:

Purpose of the Trip (Expected Outcomes):

Cost of Trip Per Student and Funding Source:

Cost of Trip Per Adult and Funding Source:

Method of Fundraising:

Modes of Transportation:

District Expenses (i.e. substitute teachers, district transportation):

Itinerary (Attach):

Approved _____

Not Approved _____

Principal

Date

Superintendent of Schools

Date