

NON-LOCAL, OVERNIGHT & EXTENDED FIELD TRIP APPLICATION (To be completed by Teacher/Advisor)

School Stanubod High Today's Date 1019/23
Individuals/Group Involved AMICHTS Number of Students 18
Activity State VB Tomment
Destination Yakma, WA
Departure Date 11/16/33 Return Date 11/19/33
Accommodations: Fanfield IM + Swites
Source of Revenue: Athletics - General
Fundraising Activities 1/0
Individual Student Cost Total Group Cost 7100,25 (approx.)
How was this activity/trip available to any interested and/or eligible student(s) Open Tryout
How was this trip promoted to all interested/eligible students? On live, announcements, etc
Will any student(s) be excluded from this trip due to the inability to pay?
Insurance (special coverages) N
Purpose of Trip (include the educational value) GNS VIS to compete M WIOCA State Town am ent
Has this trip been previously taken? <u>Yes</u> If yes, when? <u>aoal</u>
List of chaperones and students MUST be attached to this form. (Chaperones must be of each gender if students of each gender are attending.)
1. Additional information needed: 2. Insurance coverage to be arranged through the insurance office. 3. Parent permission and medical authorization forms go to the principal. 4. All district employees need to submit a travel request form. 5. Notity the school nurse. Signature of Initiator Signature of Building Principal
For Administration Use Only:
Board approval needed. Will be submitted onApproved
Superintendent or Designee Signature Date