



## APPLICATION FOR STUDENT TRAVEL

School Name \_\_\_\_\_ Region \_\_\_\_\_ Unit Number \_\_\_\_\_

Travel Destination \_\_\_\_\_

Travel Days and Dates: Total Number of Travel Days \_\_\_\_\_ (Departure Date \_\_\_\_\_ Time: \_\_\_\_\_ : \_\_\_\_\_) (Return Date: \_\_\_\_\_ Time: \_\_\_\_\_ : \_\_\_\_\_)

Check One:  Educational Travel  Non-Educational Travel

Name of Coordinator: \_\_\_\_\_ Title: \_\_\_\_\_

Purpose of Travel \_\_\_\_\_

(Use an additional sheet of paper if needed to explain the purpose of the trip.)

Educational Benefits to be derived from trip/tour: \_\_\_\_\_

Check One: [see reverse]  Category 1  Category 2  Category 3  Category 4

Name of Tour Operator [If applicable] \_\_\_\_\_ Tour Operator Tel. No. ( ) \_\_\_\_\_

Name Bus Company \_\_\_\_\_ Bus Company Tel. No. ( ) \_\_\_\_\_

School Tour Supervisor \_\_\_\_\_ Tel. No. Day ( ) \_\_\_\_\_ Emerg. ( ) \_\_\_\_\_

**PARTICIPANTS**

Grade Level of Students: \_\_\_\_\_ Number of Students \_\_\_\_\_

Number of Parent Volunteers: \_\_\_\_\_ + Number of School Staff \_\_\_\_\_ = Total # of Chaperones \_\_\_\_\_

According to Amended Board Report 12-26-97:  
"A minimum of two (2) chaperones are required on all trips and one (1) chaperone for every ten (10) students" Total # of Participants \_\_\_\_\_

Name of Chaperones including Teachers \_\_\_\_\_

**FINANCIAL** Cost of the Trip/Tour \$ \_\_\_\_\_ Cost per person \$ \_\_\_\_\_ Cost of Bus \$ \_\_\_\_\_  
 Trip Funding: From Student Fees \$ \_\_\_\_\_ From Fund Raising \$ \_\_\_\_\_ From Grants \$ \_\_\_\_\_  
 From School Funds \$ \_\_\_\_\_ Enter Budget Classification \_\_\_\_\_  
 Cost of the Chaperones to be paid from: Student Fees \_\_\_\_\_ Fund Raising \_\_\_\_\_ Grants \_\_\_\_\_ School funds \_\_\_\_\_  
 Adults \_\_\_\_\_

**INSURANCE**  
THE BOARD PROVIDES A TRAVEL ACCIDENT AND SICKNESS BENEFIT FOR APPROVED FIELD TRIPS AS DESCRIBED IN THE BOX ON THE REVERSE SIDE.

**SCHOOL PRINCIPAL CERTIFICATION:**

I certify that: (1) a release form is on file at this school for each student and chaperone who will participate in this trip/tour, (2) that buses departing Chicago, be on the Current Approved Bus Vendor Listing or Certified Coach Listing; and (3) that no student has been excluded due to financial reasons.

\_\_\_\_\_  
(Signature of Principal) \_\_\_\_\_ Date

**APPROVAL OF TRAVEL:**

\_\_\_\_\_  
REGION EDUCATION OFFICER (Required for trips in Categories 1, 2 & 3.) Date \_\_\_\_\_

\_\_\_\_\_  
CHIEF EDUCATION OFFICER (Required for trips in Category 1 and Appeals) Date \_\_\_\_\_