Ector County ISD 068901

STUDENT ACTIVITIES: TRAVEL

FMG (EXHIBIT 21)

EXTRA-CURRICULAR STUDENT TRAVEL APPROVAL FORM

Student travel must be approved based on the direct benefits for the students. The trip must have approval of Superintendent or designee before any travel arrangements and reservations are made or students and parents become involved with any facet of the trip. Out-of-state travel must have Board approval.

Name of Group: Permian Panther Paws Dance Team	Campus: Permian High School
Date of trip: 11/23/19 11/29//9 Grade levels involve Number of instructional days: 0 Location: New York City - Macy's (Please attach an itinerary)	ed: 9th-12th Number of students: 37 Thanksgiving Day Parade
Funding source: District Budget Campus Budget	Department Budget Activity fund × Personal
Instructional days out of the classroom: The sponsors/coaches participant? <u>x</u> Yes No	
Trip function: Cocurricular ×_ Extracurricular Co	on-athletic Impetition
Trip profile: In-state Out -of-state Overseas Annual Biennial Post-district	TourField tripInvitationalCompetition associated with a tour or attraction
Transportation mode: School bus School suburbar	Charter bus Xplane
How does the trip relate to and benefit the Campus Improvem EXPUSE STUCIENTS to dance outside or approved to the trip require fund-raisers? × Yes No	ent Plan, District Improvement Plan and/or the TEKS? clessa. It uill also give students hey graduate high school.
Are deadlines established to guide the sponsors/directors if th _x_ Yes No	e trip has to be canceled due to lack of funding?
How many sponsors will accompany the students? 4 What is the ratio of sponsors to students? Sponsors 1	/Students ⁹ (gender appropriate)
Student orientation - Date: 5/13/19 Time: 6:00pm Parent orientation - Date: 5/13/19 Time: 6:00pm Sponsor orientation - Date: 5/13/19 Time: 6:00pm Sponsor orientation - Date: 5/13/19 Time: 6:00pm Sponsor orientation - Date: 5/13/19 Time: 6:00pm Will any kind of insurance be required? x Yes Will room and baggage searches be required? x Yes	Location: PHS Cafeteria M Location: PHS Cafeteria PHS Cafeteria
Medical and travel releases will be required.	
Coach/Sponsor:	5-24-19
Principal approval: (Signature) Field Trips/I	Excursions (Date) Excursions (Date)
(District Sanction (K-8 Field Trip	ed Competition) s/Excursions)
Superintendent or designee Approval: (Signature)	5/31/19
(Out-of	-state)
Board approval:	<u> </u>
(Signature)	(Date)

DATE ISSUED: 04/21/04 FMG (EXHIBIT 21)

REVIEWED: 04/20/04

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