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.

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Name of Group: Model Organization of American States Campus: New Tech Odes sc
Date of trip: <u>12/02/14</u> Grade levels involved: <u>12/06/144</u> Number of students: <u>11</u> Number of instructional days: <u>4</u> Location: <u>Org. of Amarking FarDC</u> (Please attach an itinerary)
Funding source: _/_District BudgetCampus BudgetDepartment BudgetActivity fundPersonal
Instructional days out of the classroom: The sponsors/coaches/directors have checked the accrued number of days for each participant? <u>V</u> Yes <u>No</u>
Trip function:CocurricularExtracurricularCompetition (Non-athletic)
Trip profile:In-stateOut -of-stateOverseasTourField tripInvitationalAnnualBiennialPost-districtCompetition associated with a tour or attraction
Transportation mode:School busSchool suburbanCharter busplane
How does the trip relate to and benefit the Campus Improvement Plan, District Improvement Plan and/or the TEKS?
Does the trip require fund-raisers?YesNo
Are deadlines established to guide the sponsors/directors if the trip has to be canceled due to lack of funding?
How many sponsors will accompany the students? $\underline{3}$ What is the ratio of sponsors to students? Sponsors <u>I</u> /Students <u>4</u> (gender appropriate)
Student orientation - Date: $11/18/14$ Time: $6:00$ Location: $1/e_{e_{e_{e_{e_{e_{e_{e_{e_{e_{e_{e_{e_{e$
Medical and travel releases will be required.
Coach/Sponsor: <u>NieMas</u> <u>II 05/14</u>
(Signature) (Daté)
Principal approval:
Superintendent or designee (District Sanctioned Competition) Approval:
Board approval:
(Signature) (Date)