

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: SkillsUSA Campus: ATC

Date of trip: 06/20/2010 Grade levels involved: 10-12 Number of students: 4
Number of instructional days: 0 Location: Kansas City, MO
(Please attach an itinerary)

Funding source: ☒ District Budget ☐ Campus Budget ☐ Department Budget ☐ Activity fund ☐ Personal

Instructional days out of the classroom: The sponsors/coaches/directors have checked the accrued number of days for each participant? ☐ Yes ☒ No

Trip function: ☒ Cocurricular ☐ Extracurricular ☐ Competition (Non-athletic)

Trip profile: ☐ In-state ☒ Out-of-state ☐ Overseas ☐ Tour ☐ Field trip ☐ Invitational
☒ Annual ☐ Biennial ☐ Post-district ☒ Competition associated with a tour or attraction

Transportation mode: ☐ School bus ☐ School suburban ☐ Charter bus ☒ plane

How does the trip relate to and benefit the Campus Improvement Plan, District Improvement Plan and/or the TEKS?

TEKS will be used in competitions.
Does the trip require fund-raisers? ☐ Yes ☒ No

Are deadlines established to guide the sponsors/directors if the trip has to be canceled due to lack of funding?

☒ Yes ☐ No

How many sponsors will accompany the students? 1

What is the ratio of sponsors to students? Sponsors 1 / Students 4 (gender appropriate)

Student orientation - Date: 03/27/2010 Time: 4:P.M. Location: Corpus Christi, Texas

Parent orientation - Date: 05/20/2010 Time: 6:P.M. Location: Advance Technical Center

Sponsor orientation - Date: 03/27/2010 Time: 4:P.M. Location: Corpus Christi, Texas

Sponsor criminal background check - Date: May 2009

Will any kind of insurance be required? ☒ Yes ☐ No

Will room and baggage searches be required? ☒ Yes ☐ No

Medical and travel releases will be required.

Coach/Sponsor: [Signature]
(Signature)

04/05/2010
(Date)

Principal approval: [Signature]
(Signature)

4-10-10
(Date)

(District Sanctioned Competition)
(K-8 Field Trips/Excursions)

Superintendent or designee

Approval: _____
(Signature)

(Date)

(Out-of-state)

Board approval: _____
(Signature)

(Date)