STUDENT ACTIVITIES: TRAVEL

FMG (EXHIBIT 21)

EXTRA-CURRICULAR STUDENT TRAVEL APPROVAL FORM

The trip must have approval of Superintendent
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: Boys Gymnastics Campus: Odessa High
Date of trip: May 17-20 Grade levels involved: TZ Number of students
Funding source: District BudgetCampus BudgetDepartment BudgetActivity fundPersonal
Instructional days out of the classroom: The sponsors/coaches/directors have checked the accided names of the classroom. The sponsors/coaches/directors have checked the accided names of the classroom.
Trip function: Cocurricular X Extracurricular Competition (Non-athletic)
Trip profile:In-stateX_Out -of-stateOverseasTourField tripInvitational
Transportation mode:School busSchool suburbanCharter busXplane
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?Yes _X_No
Are deadlines established to guide the sponsors/directors if the trip has to be canceled due to lack of funding? Yes _X_No
How many sponsors will accompany the students?/Students3 (gender appropriate) What is the ratio of sponsors to students? Sponsors/Students3 (gender appropriate)
Student orientation - Date: Feb 2-23 Time: 5:00 Location: Location: Location: Location: Sponsor orientation - Date: N/A Time: Location: Location: Location: Location: Location: Will any kind of insurance be required? Yes No Will room and baggage searches be required? X Yes No
Medical and travel releases will be required.
Coach/Sponsor: (Signature) (Date)
Principal approval: Field Trips/Excursions UIL Competition UIL Competition
Superintendent or designee Approval: (Signature) District Sanctioned Competition) (K-8 Field Trips/Excursions) (Superintendent or designee) (Date)
(Out-of-state)
approval: (Signature) (Date)
DATE ISSUED: 04/21/04 REVIEWED: 9/2009 FMG (EXHIBIT 21)