Herscher C. U.S.D. #2

Application for Overnight Educational / Extra-Curricular Trip

Note: All requests for overnight trips must be submitted to the Building Principal. The Principal is responsible for presenting overnight trip information to the Board of Education PRIOR to the Teacher/Coach/Sponsor securing rooms or making reservations.

| Teacher/Sponsor/Coach: | Club/Organization/Class |
|---|--|
| Date(s) of Trip: | # of Instructional Days Missed: |
| Destination: | |
| Parent pick-up location upon return | r: |
| <u>Curriculum Objective:</u> MUST include a t | tentative itinerary of the trip activities. |
| | |
| Transportation Needed: (Ev. School bus. | echael van charter hus etc.) |
| <u>Transportation Needed:</u> (Ex. School bus, s To and from destination: | crool van, charter bus, etc.) |
| | |
| Lodging: Type of Housing: | Number of nights: |
| Lodging Name: | |
| Address: | |
| Ph Number: | |
| Contact Info: | |
| Funding sources: (i.e. Fundraisers, D | per person: \$ |
| Roster must be attached. | |
| Roster must be attached and in | (Males / Females) clude phone numbers. Chaperones must scanned through the Raptor system. |
| | |
| Ratio of Chaperones to student *Mixed gender overnight trips l | s:* MUST HAVE mixed gender chaperones at a ratio of 10:1. |
| During overnight stays, a room | check of students will be conducted by Chaperones/Sponsor each night. |
| Finalizing Checklist: ☐ Student Roster Attached. ☐ Itinerary Attached. ☐ Chaperone(s) have been cleared via R ☐ Chaperone(s) Roster Attached. ☐ Trip has been arranged with Transpor | |
| Date Submitted: | Teacher/Coach/Sponsor Signature: |
| | ☐ Approved. ☐ More information needed. |
| Principal Signa | ature: Date: |