

Trip Approval Request

(Please attach itinerary with request.)

Name of School: _____ Name of Teacher: _____

TYPE OF TRIP:

- A. Class, club and student association - **2 school days max.** (ie. senior class trip & etc.)
Organization/Class Name: _____
- B. Course-related and promotional groups - **3 school days max.** (ie. music, drama & etc.)
Organization/Class Name: _____
- C. Outdoor and extended campus education activities and mission outreach projects - **5 school days max.** (ie. modern language, history, & etc.)
Organization/Class Name: _____
- D. Combination of tours - see Education Code 1616 and **attach** explanation.

Date of Departure: _____ Date of Return: _____ TOTAL School Days _____

DESTINATION & APPROVAL PROCESS:

All tours must comply with Ed. Code section 1618-1624

	School Administrator	Conference Supt.	Hawaii Conf. Supt.	School Board	SECC Office of Ed.	GC Office of Ed.
<input type="checkbox"/> Intra Conference (Ed. Code section 1606)	x			x		
<input type="checkbox"/> Out of Conference (Ed. Code section 1608)	x			x		
<input type="checkbox"/> Out of Union (Ed. Code section 1610)	x			x	x	
<input type="checkbox"/> Tours to Hawaii (Ed. Code section 1612)	x	x	x	x	x	
<input type="checkbox"/> Interdivisional Tours (Ed. Code section 1614)	x			x	x	x

Location(s): _____

Number of students: _____ Male _____ Female Cost per student: \$_____

Number of chaperones: _____ Faculty _____ Parents

School Board Approval: _____ Date _____ Signature of School Administrator _____

To be completed by SECC Office of Education

Request approved

Request denied _____ Date _____ Signature of Superintendent _____