DELWARE VALLEY SCHOOL DISTRICT EDUCATIONAL TRIP REQUEST

Educational Trips:

All educational trips require at least two weeks' PRIOR approval or absences will be counted as unexcused. The maximum number of days given approval for an educational trip is <u>five</u> days per school year. Requests for educational trips must be submitted in writing along with an itinerary list of daily educational activities. (Please use the form below and turn it in to your child's teacher.) Keep in mind that the combined maximum number of days allowed for both educational and non-educational absences is ten days. Students with absences in excess of ten days will not be given approval for an educational trip.

Note: After approval of the trip is requested, arrangements should be made with the homeroom teachers to secure homework and assignments for the period of time the student is absent. In addition to homework and assignments from the teacher, please have your child keep a daily journal to share with classmates upon return to school.

PARENTS:

PLEASE RETURN THIS FORM TO YOUR CHILD'S TEACHER WHEN REQUESTING AN EDUCATIONAL TRIP

I hereby request permission for my child to participate in an educational trip as follows:

| Student's Name: | | | Grade | - |
|-------------------------|--------|--------|-------|---|
| Teacher: | | School | | |
| Date(s) of Educational | Trip: | | | |
| Educational Trip Destir | ation: | | | |
| ITINERARY: Day 1: | | | | |
| Day 2: | | | | |
| Day 3: | | | | |
| Day 4: | | | | |
| | | | | |
| | | | | |
| | | | | |

Parent/Guardian Signature

PRINCIPAL APPROVAL:

Student is approved for: ______ Educational Trip Days as long as their combined educational and non educational absences do not exceed the 10-day maximum at the time of their 5 day or less educational trip. **If your child is out sick before your educational trip, you should plan to call the school a few days before leaving to confirm the total number of educational trip days approved as that number could be affected.**

Date: _____ Principal's Signature: _____

Home Rm. Teachers:

Send original to office in attendance folder. When the approved/disapproved copy is returned, please send it home with the student.