



Administrative Form 5306
TRAVEL REQUEST FORM
 Day, Overnight, Out-of-State and International Travel
 (District Sponsored)

1. Refer to Administrative Manual 5310, Student Travel Procedures Manual, for specific instructions related to student travel – field and activity trips.
2. This form must be submitted for all school/District-sponsored day, extended day, overnight and international student travel, and includes travel for curricular, co-curricular and extra-curricular activities.
 - a. For the purposes of this form, the Donner Lake area is considered in-state travel.
3. Trip approval for school/District sponsored travel must be requested from the Principal pursuant to the following guidelines. Please note: the timelines provided are considered guidelines to allow staff an adequate amount of time for the vetting and approval of volunteers/chaperones, transportation requests, etc. Timelines may be adjusted if all requirements have been met and necessary approvals have been granted. The timelines of individual District departments, such as Volunteer Services, Fingerprinting and Transportation, may not be adjusted without that department’s advance approval.
 - a. For day and extended day trips, requests should be made at least eight (8) weeks in advance.
 - b. For overnight trips, requests should be made at least at least twelve (12) weeks prior to the trip. Overnight travel must be approved by the Area Superintendent in the Office of School Performance
 - c. For international travel, requests should be made at least six (6) months in advance. International travel must be approved by the Area Superintendent and the Deputy Superintendent.
4. This form shall be used to explain itinerary; special events; fund-raising activities; meal and housing provision; any benefits to adult supervisors beyond transportation, lodging, and food; and other pertinent information.

5. Please complete:

TRIP TITLE: _____
 ___ Day ___ Extended Day ___ Overnight ___ International

Staff Member Leading Trip: _____

School/Organization: _____

of Classes/Groups/Teams: _____

of students participating: _____

Destination (city/country): _____

Departure Date and Time: _____

Return Date and Time: _____

Number of Teachers/Staff/Coaches _____; Number of Parents/Guardians/Volunteers _____

TRIP TITLE: _____

Educational Objective(s):

| |
|-------------------------------------------------------------------------------------------------|
| Describe the educational objective(s) for this trip and how the trip relates to the curriculum. |
|-------------------------------------------------------------------------------------------------|

Transportation Type

District Bus/Vehicle Commercial Transportation: _____
 No District Transportation Provided Other: _____

ESTIMATED FINANCIAL PLAN

No funds that have been or are to be deposited with the District can be committee until all needed approval has been obtained.

| EXPENSES | TOTAL COST # of participants x \$ per participant = Total Cost (e.g. 13 x \$5 = \$65) | TOTAL COST TO BE PAID FROM: | | | | TOTAL \$ | COMMENTS |
|--------------------------------------------|---------------------------------------------------------------------------------------------|-----------------------------|--------------|-------|-----------------|-------------|----------|
| | | Activities Fund | General Fund | Other | Indiv. Students | | |
| Student Transportation | | | | | | | |
| Student Lodging | | | | | | | |
| Student Meals | | | | | | | |
| Student Other – Registration, etc. | | | | | | | |
| Staff/Chaperon Transportation | | | | | | | |
| Staff/Chaperone Lodging | | | | | | | |
| Staff/Chaperon Meals | | | | | | | |
| Staff/Chaperone Other – Registration, etc. | | | | | | | |
| Substitutes | | | | | | | |
| TOTAL | \$ | | | | \$ | | |

TRIP TITLE: _____

DETAILED INFORMATION

Explain the itinerary; special events; fund-raising activities; meal and housing provisions; any benefits to adult supervisors beyond transportation lodging and food; and other pertinent information.

Itinerary: (What is the overall plan for this trip?) if necessary, attach detailed itinerary

Special Events/Activities (Examples: parades, concerts, camping, competition/tournament, etc.)

Fund-Raising Activities (Describe how/when/where fundraising for this trip will happen and how you will ensure no student will be denied participation due to lack of funds.) Note: Use of a fundraising organization must be approved by the Purchasing Department.

TRIP TITLE: _____

Meal and Lodging Provisions:

Are you using an Educational Travel Provider or travel agent to plan this trip?
 Yes No. If yes, provide name of agency and contact information

Other Pertinent Information, to include telephone numbers where all staff and other chaperones can be reached during this trip:

TRIP TITLE: _____

REVIEW AND APPROVAL

| | | |
|-----------------|-----------|------|
| Staff Organizer | Signature | Date |
|-----------------|-----------|------|

Approval(s): (Principal of each participating school must sign.)

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|-----------|-----------|------|
| Principal | Signature | Date |
|-----------|-----------|------|

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|-----------------------------------------------|-----------|------|
| Area Superintendent (for overnight travel) | Signature | Date |
|-----------------------------------------------|-----------|------|

| | | |
|-----------------------------------------------------|-----------|------|
| Deputy Superintendent (for international travel) | Signature | Date |
|-----------------------------------------------------|-----------|------|