

Big Spring Middle School Educational Trip Request Form

Student's Name: _____

Dates of Absences: _____

Reason for Absence: _____

Please list the following:

Trip Sites:	Educational Value:
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

Student will be accompanied and supervised by:

___ Parent/Guardian _____ Phone: _____

___ Other _____ Phone: _____

Students: This form should be given to the middle school office at least **three (3) days prior** to the absence. Classroom assignments are due upon the first day student has returned to school.

___ I have received the homework assignment sheet and know that assignments are due the first day I return to school.

For School Use Only: ___ Approved ___ Disapproved Comments: _____ _____ Administrator's Initials: _____ Date: _____
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