

WASECA PUBLIC SCHOOLS
INDEPENDENT SCHOOL DISTRICT 829
EXTENDED TRIP REQUEST FORM
POLICY 610

Date: _____ District Personnel Providing Proposal: _____

Trip Information
Student Group and/or Curriculum Area of Study: _____
Proposed Destination: _____
Proposed Duration of Trip: _____
Anticipated Cost of Trip: _____
Purpose of Proposed Trip: _____
Proposed Means of Transportation: _____
Itinerary of Proposed Trip (Can be included as an attachment): _____
Proposed Number of Chaperones: _____
Additional Comments as Needed: _____

Student Representative Signature and Date of Approval: _____

Principal Signature and Date of Approval: _____

Superintendent Signature and Date of Approval: _____

Date of School Board Approval: _____

Per School Board Policy 610, it is the general expectation of the school board that all student trips will be well planned, conducted in an orderly manner and safe environment, and will relate directly to the objectives of the class or activity for which the trip is requested.

Send this form to:
Waseca Public Schools
District Office
501 E. Elm Avenue
Waseca, MN 56093



"Waseca Public Schools empowers each learner to thrive in an ever-changing world."