

Jubilee Christian School — Educational Trip Request Form

Student's Name _____ Date of application _____

Student's grade _____ Teacher: _____

Date(s) of educational trip: Begin _____ End _____ Total # of Days Missed: _____

Destination of trip _____

List itinerary and educational experiences:

Were there prior requests this school year? Yes ____ No ____ if so, date(s): _____

I understand that my student is required to complete all school assignments upon return to school, the work not completed within one (1) week after the student's return to school will be graded as zero (0), and that this request form, if approved, will be used in place of the standard written excuse. I certify that all the above information is true and accurate.

Signature of parent/guardian

Date

(For school use only)

Request approved _____ Request denied _____

Reason(s) _____

Principal's Signature

Date