

OVERNIGHT EXCURSION REQUEST FORM

TO: NWESD 189 Superintendent

FROM: _____
(Signature)

DATE:

SUBJECT: Request for Approval of Overnight Excursion.

I am requesting permission to accompany _____
(number of students/group name)

to _____ on _____ for the purpose
(destination) (dates)

of _____.

We will leave at _____ on _____, 20____ and return at
(time) (date)

approximately _____ on _____, 20____.
(time) (date)

The approximate cost to the NWESD 189 would be _____ (see the back of this form for a breakdown of this total) and would be paid out of account code _____.

An approximate itinerary is listed below along with the names of the student participants and chaperone(s). Thank you for your consideration of this request.

(Please complete reverse side)

Detail of Approximate Costs to the NWESD 189

1) ACCOMMODATIONS

Indicate appropriate number for each:

Name of Motel/Hotel _____

Address _____

____ Male Students _____

____ Female Students _____

____ Male Chaperone(s) _____

____ Female Chaperone(s) _____

____ Bus Driver _____

____ Advisor/Teacher _____

Phone _____

These accommodations will cost \$ _____ per room.
We will need _____ rooms (figuring four people of the same gender per room).

$$\frac{\text{_____}}{\text{(cost per room)}} \times \frac{\text{X}}{\text{(# of rooms)}} = \text{_____}$$

TOTAL COST OF ACCOMMODATIONS

2) TRANSPORTATION

Bus and Driver to _____
(destination)

Provided by _____
(school district or charter service)

TOTAL COST OF TRANSPORTATION

3) MEALS

$$\frac{\text{_____}}{\text{(# of breakfasts)}} \times \frac{\text{X}}{\text{(# of people)}} = \text{_____} \text{ BREAKFAST TOTAL}$$

$$\frac{\text{_____}}{\text{(# of lunches)}} \times \frac{\text{X}}{\text{(# of people)}} = \text{_____} \text{ LUNCH TOTAL}$$

$$\frac{\text{_____}}{\text{(# of dinners)}} \times \frac{\text{X}}{\text{(# of people)}} = \text{_____} \text{ DINNER TOTAL}$$

$$\frac{\text{_____}}{\text{(breakfast total)}} + \frac{\text{_____}}{\text{(lunch total)}} + \frac{\text{_____}}{\text{(dinner total)}} = \text{_____}$$

TOTAL COST OF MEALS

4) SUBSTITUTE COSTS

Names of personnel requiring substitutes: _____

$$\frac{\text{_____}}{\text{(# of substitutes)}} \times \frac{\text{X}}{\text{(# of days)}} \times \frac{\text{X}}{\text{(rate per day)}} = \text{_____}$$

TOTAL COST OF SUBSTITUTES

5) OTHER COSTS

List any other NWESD 189 costs associated with this trip, should it be approved:

TOTAL OF OTHER COSTS

TOTAL COST OF TRAVEL TO DISTRICT: _____
(sum of the totals above)