

FAMILY TRIP REQUEST

W. R. Croman Primary School

STUDENT'S NAME: _____

PARENT'S NAME: _____

TEACHER'S NAME: _____

Students may be excused from school for an approved family trip. The following conditions do apply. Please be specific.

1. Dates of the trip: _____

2. Destination of the trip: _____

3. Adult supervision: _____

4. Educational value: _____

It is the sole responsibility for the student/parents to see his/her teachers for work prior to the trip. It is strongly suggested that all work be completed before the trip begins. In addition, any tests, quizzes, projects, etc. will need to be completed.

Approval is based on educational value, how it fits in with career goals, past behavior and current attendance. If a family trip is denied, then days absent will be considered illegal.

Subject Completed:

MATH:	YES _____	NO _____	Teacher's Signature _____
SOCIAL STUDIES:	YES _____	NO _____	Teacher's Signature _____
SCIENCE:	YES _____	NO _____	Teacher's Signature _____
READING:	YES _____	NO _____	Teacher's Signature _____
SPELLING:	YES _____	NO _____	Teacher's Signature _____
ENGLISH:	YES _____	NO _____	Teacher's Signature _____

Teacher Comments: _____

APPROVED BY PRINCIPAL: _____ DATE: _____

APPROVAL DENIED: _____ DATE: _____