

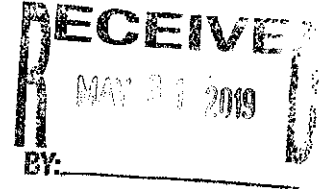
AUGUSTA SCHOOL DEPARTMENT

Out-of-State, Overnight, Out-of-Country Student Activity Travel Request

Office Use Only:
On Board Agenda (Date) 5/8/19
Approved YES or NO

This form must be completed and submitted to the superintendent's office at least one week prior to the regularly scheduled board meeting (second Wednesday of each month).

CONTACT INFORMATION



DATE OF REQUEST: 5/1/19 SCHOOL: CATC
REQUEST BY (name of student group): SkillsUSA CATC
CONTACT PERSON: Jessica Down CONTACT PHONE: x3109
NUMBER OF STUDENTS: 3
CHAPERONES: 2 Michael Fraser
Jessica Down
NAME OF EVENT: SkillsUSA National Conference
EDUCATIONAL REASON FOR TRIP: Leadership + Networking, Scholarship opportunities

TRIP INFORMATION

Overnight Out-of-State Out-of-Country
DATE(S) OF TRAVEL: June 22-30
LOCATION (City & State/Country): Louisville, Kentucky
MEANS OF TRANSPORTATION: Driving ESTIMATED COSTS: \$2200 Student Cost
ACCOMMODATIONS: Hotel, Transportation, Registrations
IF SCHOOL TRANSPORTATION IS NEEDED, INDICATE NUMBER OF MILES: 2600 Total Approx.

FUNDING

Indicate here if group will be paying own way through fund raisers, self-pay, etc.:
Students paid through Fundraisers - Chaperones paid through budget
Operating budget account # _____ Amount: _____
Student activity account # _____ Amount: _____
Donated by: _____ Amount: _____

Approved

By: _____ Date: _____ BY: James N. Anastasio Date: 5/2/19
Administrator-in-Charge James N. Anastasio, Superintendent of Schools