

AUGUSTA SCHOOL DEPARTMENT

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

Office Use Only:
On Board Agenda (Date) _____
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

RECEIVED
FEB 26 2020
BY: _____

DATE OF REQUEST: 2/24/20 SCHOOL: CATC
REQUEST BY (name of student group): ProStart team - Culinary AAs
CONTACT PERSON: Heidi Parent CONTACT PHONE: 626 2475
NUMBER OF STUDENTS: 1-5
CHAPERONES: Heidi Parent

NAME OF EVENT: ACF annual dinner (American Culinary Federation)
EDUCATIONAL REASON FOR TRIP: work with industry professionals ;
team bonding

TRIP INFORMATION

Overnight Out-of-State Out-of-Country
DATE(S) OF TRAVEL: 3/28/2020 - 3/29/2020
LOCATION (City & State/Country): Portland, Maine /USA
MEANS OF TRANSPORTATION: First student
Van ESTIMATED COSTS: —
ACCOMMODATIONS: hotel paid for + meals paid for by ACF
IF SCHOOL TRANSPORTATION IS NEEDED, INDICATE NUMBER OF MILES: _____

FUNDING

Indicate here if group will be paying own way through fund raisers, self-pay, etc.:
none
Operating budget account # _____ Amount: _____
Student activity account # _____ Amount: _____
Donated by: _____ Amount: _____

Approved

By: [Signature] Date: 2/26/20 BY: [Signature] Date: 2/26/20
Administrator-in-Charge James N. Anastasio, Superintendent of Schools