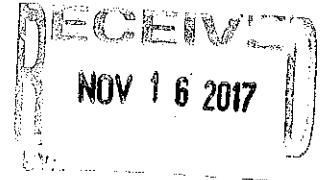


AUGUSTA SCHOOL DEPARTMENT

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

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: 11-16-17 SCHOOL: Cony HS
REQUEST BY (name of student group): Boys Varsity Basketball
CONTACT PERSON: T.J. Maines CONTACT PHONE: 649-0235
NUMBER OF STUDENTS: 14-16
CHAPERONES: T.J. Maines Isaiah Braithwaite
Levi Barnes Ed Worcester
NAME OF EVENT: Basketball game at Boston College
EDUCATIONAL REASON FOR TRIP: Travel experience, visit to college campus.

TRIP INFORMATION

Overnight 3 Out-of-State Out-of-Country
DATE(S) OF TRAVEL: Jan 18, 2018
LOCATION (City & State/Country): Newton, MA
MEANS OF TRANSPORTATION: 3 vans ESTIMATED COSTS: \$ 700
ACCOMMODATIONS: Renting vans
IF SCHOOL TRANSPORTATION IS NEEDED, INDICATE NUMBER OF MILES: 0

FUNDING

Indicate here if group will be paying own way through fund raisers, self-pay, etc.:
Fund raiser → running a tournament where ^{part of} proceeds are going towards trip.
Operating budget account # _____ Amount: _____
Student activity account # _____ Amount: _____
Donated by: Capital City Hoops Classic Amount: \$ 700. -

Approved

By: [Signature] Date: 11/16/17 BY: [Signature] Date: 11/16/17
Administrator-in-Charge James N. Anastasio, Superintendent of Schools