CHARTIERS VALLEY SCHOOL DISTRICT

Educational Trip Request Form

This request form must be comple	ted and submitted in cor	npliance with Chartiers
Valley School District Attendance	Policy 2090 (Excused Te	emporary Absences).
School Student's c	complete name	
Date of application	_ Student's grade	Room
Date(s) of educational trip: Begin	Returnin	g to school
Destination of trip		iiin e
List itinerary and educational expe	eriences:	* ** v * *
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Were there prior requests this sch	ool year? Yes No	Dates
I understand that my student is re	quired to complete all so	hool assignments
within two (2) days after his/her re	turn to school; that work	not completed will be
graded as zero (0); and that this re	equest form, if approved	, will be used in place
of the standard written excuse. I	certify that all of the above	ve information is true
and accurate.		
Signature of parent/guardian	<u> </u>	Date
	(For school use only)	
Request approved	_	
Request denied	Reason(s))
	Principal's signature	Date