

FIELD TRIP REQUEST FORM
E A SEPARATE FORM FOR EACH TRI

Parent Permission Form is required for each student field trip. See below reference distribution section for details concerning each type of trip.

Tenahya's Name

Room#

916.712.0782

Fax # 551.2196

Field.Trip

Univers of Kentucky

TRAVEL REQUEST FORM (ACC-F014)

Sacramento City Unified School District

Request to Attend: <input type="checkbox"/> Conference/Workshop	Purpose for Attending: <input type="checkbox"/> Professional Development	Instructions: This form must be completed and received in Accounts Payable at least 30 days prior to the proposed trip- 60 days if out-of-state
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Business Meeting Continued Education Credits Earned

School/Department CK McClatchy

Date Feb 018

University of Kentucky KY
of Champions (policy debate and speech)

How does this travel align with the District's

College and Career Ready Students

How will this activity/event be used and shared?

Name of Attendee(s) <small>(attach sheet for additional attendees)</small>	Position	Substitute	No. of Days <small>(Must Be Indicated)</small>	Budget Code

No
No
No
No

SEND A COPY OF THIS FORM TO PERSONNEL.

Additional Attendees Attached

Approvals:

District cost for all attendees (limit) 0

Registration 0

Meals Included?

2/26/18

Signature & Print Name