

Clarion-Limestone Area School District

Educational Trip Request Form

HIGH SCHOOL STUDENT'S ATTENDING TRIP: _____

ELEMENTARY STUDENT'S ATTENDING TRIP: _____

Destination: _____

Dates of Educational Trip: _____

Total # School Days Absent: _____ (max of 7 days per school year/2 trips per school year per student)

Student Traveling With: _____

Educational Purpose of Trip: _____

Date

Parent / Guardian Signature

Parent / Guardian Printed Name

If there is a shared custody agreement, I attest that this trip falls within the parameters of the custody agreement. _____

Parent/Guardian Signature

Please take this form to the school office at least 1 week before the scheduled trip. IF THE TRIP HAS NOT RECEIVED PRIOR APPROVAL, the trip will be an unexcused absence. After the trip is approved by the school principal, the parent/guardian will receive a letter indicating approval has been given.

OFFICE USE:

_____ Request Approved by Principal

_____ Request Denied by Principal

- Currently failing 2 or more classes
- Student will be taking PSSA Tests
- Student has exceeded 7 days and / or 2 trips during school year
- Student has had excessive absences
- Other

Revised March 7, 2025