

Frazier High School

142 Constitution Street – Perryopolis, PA – 15473

Application for Non-School Sponsored Student Educational Trip

1. This form must be submitted complete to the Principal a minimum of five school days prior to the trip (except in an emergency).
2. Requests will be approved only if it can be determined that such trip/tour is of educational value to the student.
3. Unless there are unusual or emergency circumstances, this absence will not be approved if the student has exceeded ten (10) absences in the current school year.
4. If more than one child in a family will be taking the tour/trip, a separate request for each child shall be made to each child's building Principal.
5. Educational trips will not be approved for absence during any scheduled standardized test(s) or comprehensive teacher's exams (midterms/finals).
6. Satisfactory academic achievement will be considered in the approval of such a request.
7. All schoolwork must be picked up by the student prior to departure and turned in complete within five school days.
8. All teachers and the building principal must sign this form indicating student has requested the work for the travel date(s) indicated.

Student's Full Name: _____ Date of Application: _____

Date(s) of Requested Absence: _____ Grade Level: _____

Total Number of Absences to Date: _____ Excused _____ Unexcused: _____

Educational Destination: _____ Is this trip for a college visit? Yes No

Educational Value of the Trip: _____

It is my understanding that my child will contact his/her teachers at least 5 school days prior to the departure date to determine what requirements or assignments must be completed in order to be compliant with the approval for this trip. It is my understanding that all work must be completed and turned in within five school days of the return date. Work that is not submitted in this timeframe may result in no credit or partial credit at teacher discretion.

Parent(s) Name: _____ Phone #: _____

Parent Signature: _____ Email: _____

Period	Subject	Teacher Initials	Academic Concerns
1			
2			
3			
4			
5			
6			
7			

Approved: _____ Not Approved: _____ Principal Signature: _____

Reason for Disapproval: _____ Excessive Absenteeism
 _____ Poor academic Performance (grade report attached)
 _____ Standardized Tests/Comprehensive Exams
 _____ Other: