Washington County School Board
652 Third Street
Chipley, FL 32428

Out-of-State Travel Request Form

School: _____ Date of Request: _____

Sponsor/Group Information

Requested by: _____ Group Name: _____

Group Contact: _____

E-mail Address: _____ Cell Phone Num: _____

Purpose of Trip

Number of Students: _____ Number of Chaperones: _____ Number of Employees: _____

Transportation

Type of Transportation: _____ Estimated Number of Vehicles: _____

Itinerary

Departure Date: _____ Departure Time: _____

Return Date: _____ Return Time: _____

Trip Destination

Location: _____

City _____ State: _____

School Board Members / Superintendent Approval Information

☐ Approved ☐ Disapproved Date: _____

_____ _____

Signature / Board Chairman Signature / School Superintendent