ST

6410 - Off-Site Learning Proposal

Date Submited:School:		Faculty Sponsor:	
Depart Date & Time:		Return Date & Time:	
1.	Educational Purpose and Value: Hopic study, curriculum area or self-	Iow is this trip correlated with your classroom studies? Is it related to large developed units?	
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1.	Pre-Activities: What do you plan to knowledgeable?	o do before the off-site learning experience to get students ready and	
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2.	On-Site Field Work: What do you	plan to study at the outing?	
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3.	Post-Activities: What do you plan	to do after the students have completed the off-site learning experience?	
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ATTACH COPY OF DAILY ITINERARY (Include itineraries, additional information and/or brochures describing proposed trip.)

Hotel Accommodations (name, address & phone):	
Cell phone number, (and name if different than the sponsor's) for emergency:	
Teacher's Signature:	
Principal's Signature:	_

All paperwork is scanned and emailed to the Executive Administrator of School's Administrative Assistant, upon the principal's approval.

Form # 6410 to be used for the school year 2022-2023

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