

SCHOOL ACTIVITY/CLASS TRIP STUDENT PERMISSION FORM

Student: \_\_\_\_\_

Date: \_\_\_\_\_

A class trip has been approved to DECA ICDC in ORLANDO, FLORIDA  
on April 24- April 29, 2015  
(date) (destination)

Purpose/Description: 2015 DECA International Career Development Conference

**Teachers:**

All teachers whose class will be missed are required to indicate yes, the student's academic performance and attendance area at an acceptable level, or no, it is not, and should sign. The student is responsible for making arrangements to make-up work.

A1<sup>st</sup> \_\_\_\_\_

B1<sup>st</sup> \_\_\_\_\_

A2<sup>nd</sup> \_\_\_\_\_

B2<sup>nd</sup> \_\_\_\_\_

A3<sup>rd</sup> \_\_\_\_\_

B3<sup>rd</sup> \_\_\_\_\_

A4<sup>th</sup> \_\_\_\_\_

B4<sup>th</sup> \_\_\_\_\_

**Parents:**

The signature of a parent/guardian is required in order to allow your child to participate in this off-campus trip. Please sign the bottom of this form and return it to the teacher.

Sincerely,

Melina Stiffen

Mode of travel: [ ] School/Activity Bus [ ] Car(s)  Other CHARTER BUS

Cost of trip (if any): \$ 685.00

Time of departure from school: 5:00 am 04/24/15

Time of return to school: 3:00 pm 04/29/15

I have read the field trip description.

I give permission for \_\_\_\_\_ to go on this trip sponsored  
(student's full name)

by Charlotte-Mecklenburg Schools.

\_\_\_\_\_  
(date)

\_\_\_\_\_  
(parent/guardian signature)

\_\_\_\_\_  
(phone)