



## Travel/Study Approval for Overnight and Extended Trips Out of the Washington Metropolitan Area

Office of School Performance  
MONTGOMERY COUNTY PUBLIC SCHOOLS  
Rockville, Maryland 20850

**MCPS Form 210-4**  
**October 2010**

**TO BE SUBMITTED TO THE COMMUNITY SUPERINTENDENT PRIOR TO PARENT NOTIFICATION OF THE PROPOSED TRIP AND AT LEAST FOUR WEEKS IN ADVANCE OF THE TRIP.**

School \_\_\_\_\_ Principal \_\_\_\_\_

Dates(s) of trip \_\_\_\_\_ Staff sponsor of trip \_\_\_\_\_

Principal designee in accordance with Regulation JGB-RA, *Search and Seizure* \_\_\_\_\_

Grade level of students involved \_\_\_\_\_ No. of students \_\_\_\_\_ Total cost per student \_\_\_\_\_

Sources of money for those students unable to pay \_\_\_\_\_

Location of trip \_\_\_\_\_

Name of travel agent (if applicable) \_\_\_\_\_

Name of carrier: (Carrier must be on MCPS approved list of carriers. This list is sent to schools annually.)

\_\_\_\_\_  
(Current certificate of insurance must meet MCPS requirement as specified in Regulation IPD-RA, pages 2 and 3.)

Objectives of trip:

Description of instructional and supervisory arrangements for students not participating in this trip:

(over)

