

SCOTTSBORO CITY BOARD OF EDUCATION
Request for Out-Of-State Travel & Leave
(Blue Form)

NAME: _____ DATE SUBMITTED: _____
Print Name

DESTINATION(s): _____
City, State

DATE(s) OF TRAVEL: _____
Example: 1/21/2014 through 1/25/2014

MODE(s) OF TRANSPORTATION: _____
Example: Car, School bus, Charter bus, Train, Plane, Ship, etc.

TYPE OF LEAVE REQUESTED: _____
Example: PD for Instruction/Athletics, Extracurricular/Athletic travel with students, Instructional travel with students
A separate Field Trip Request must also be submitted to the Principal and Director of Operations if students are involved

SOURCE(s) OF FUNDS FOR EXPENSES: _____
Example: Title Funds, Athletic accounts, Local School, Business sponsor, personal, etc.

PURPOSE OF TRIP/RATIONALE: *(Please Be Specific. Who is involved? Why is trip necessary? Etc.)*

EMPLOYEE/SPONSOR SIGNATURE DATE: _____

SUPERVISOR/PRINCIPAL SIGNATURE YES approved NO DATE: _____
Circle Response

SUPERINTENDENT/DESIGNEE SIGNATURE YES approved NO DATE: _____
Circle Response

Revised August 15, 2014