

**CLEAR CREEK INDEPENDENT SCHOOL DISTRICT  
STUDENT TRAVEL REQUEST**

**EXHIBIT D**

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School	Organization/Club Grade Level	Sponsor/Teacher
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Event/Activity: \_\_\_\_\_

Sponsored by: (Ex. U.I.L) \_\_\_\_\_

Location: \_\_\_\_\_

Date(s): \_\_\_\_\_ Time(s) of Event(s) \_\_\_\_\_

Purpose/Educational Value: \_\_\_\_\_

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Overnight: Yes  No  If yes, a CCISD Travel Itinerary Form and official event flyer/agenda must be included

Number of Students Attending: Boys \_\_\_\_\_ Girls \_\_\_\_\_  
Attach list of all participants and official capacity of each student in attendance.

Adult Chaperones:

Professionals	Paraprofessionals	Parents
_____	_____	_____
_____	_____	_____
_____	_____	_____

Transportation (please check one):

District Supplied       Private Vehicle

If a private vehicle(s) is/are to be used, please provide details on Alternative Student Travel for School Event Form(s)

Budget Code:

\_\_\_\_\_ - - - - - \$ \_\_\_\_\_

Approximate Cost to the District: \_\_\_\_\_

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

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

Budget Manager: \_\_\_\_\_ Date: \_\_\_\_\_

Education Support Center: \_\_\_\_\_ Date: \_\_\_\_\_