



Family Trip Form (3 or More Days)

570-595-6355 evergrn@ptd.net

- Please submit *Family Trip Form* **AT LEAST ONE (1) WEEK PRIOR** to scheduled trip.
- **PLEASE COMPLETE ONE (1) FORM PER STUDENT.**

Student Name: _____
(Please print clearly)

Phone Number: _____ Email: _____

Total **school** days missed: _____

Student's last day of classes before trip: _____ Student will return to class on: _____

X _____
Parent Signature

Principal's Signature
*Not to be signed until all teachers have signed below

- The student is responsible for notifying every teacher of their upcoming trip, **before handing this form in to the Principal.** Teachers must sign below acknowledging they have been given the dates of the trip.
- Students will be given appropriate assignments as determined by each teacher. These assignments will be posted on Google Classroom.
- All school work must be turned in immediately upon date of return or assignments will be considered late and graded accordingly.

Teacher Signatures

Course

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____
