SHARPSVILLE AREA SCHOOL DISTRICT Sharpsville, Pennsylvania 16150

EDUCATIONAL TRIPS NOT SPONSORED BY THE SCHOOL DISTRICT

The Sharpsville Area School District discourages extended absences from school trips, however, it is recognized that certain travels may be educational.

For a maximum of five (5) school days for the 2024-2025 school year, the District may grant excused absences from school for trips/vacations having educational value as determined by both the Principal and Superintendent. Students will <u>not</u> be granted permission for trips scheduled on days that the student is testing for the PSSAs, Keystone assessments, and/or final exams. Please check with office personnel regarding the days of testing <u>before</u> scheduling an educational trip. Absences exceeding the approved five (5) days will be considered unlawful/unexcused. The form below must be completed and returned to the Principal's office AT THE VERY LEAST, ONE (1) WEEK PRIOR TO THE FIRST DATE OF THE TRIP OR VACATION.

You will only **receive a phone call** from the school if the trip is **NOT APPROVED.** If the trip is **APPROVED**, the **student is responsible for all assignments** missed during the absence. The student is to contact his/her teachers for assignments **PRIOR** to the absence and have the teacher initial the attached page. If the student does not secure his/her work before the trip, he/she may forfeit make-up privileges.

Approval is not automatic. Approval is contingent upon attendance, academics, and discipline record. (Approved educational trips are for a maximum of five (5) days for each school year. Please note that any days exceeding five (5) school days will be unlawful and/or unexcused.)

tudent's Name:		Today's Date:	
Address:			
Telephone Number:	Grade:	Homeroom:	
Date(s) of Anticipated Absences:			

City/State and points of interest of educational value (activities, tours, shows, visits, etc.):

I certify that all of the information stated above is true. I believe that this trip has sufficient educational value to warrant my child/children absent from school and that he/she will be under the supervision of a responsible adult. If excused, he/she will fulfill all responsibilities relative to the absence in a timely and scholarly manner. I understand the consequences if this trip is taken without approval. The day(s) absent will be considered unlawful and make up of class assignments will not be considered.

Parent/Guardian Signa	ture:				
FOR OFFICE USE					
Absences:	Tardie	s:	Academics:		
The above request is o time he/she will not be		value in relation to the studen	t's current course of study and the amount of		
Approved:	Not Approved:	Principal's Signature:			
Approved:	Not Approved:	Superintendent's Signature:	7/2024		

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EDUCATION TRIP ASSIGNMENTS

Please use this sheet to record your assignments for your forthcoming trip. It is your responsibility to discuss your assignments with your teachers PRIOR to leaving on your trip. You will be responsible for the material assigned by your teachers and the work will reflect upon your grades. If you do not complete the work or if you do not discuss your assignments with your teachers before your trip, you may receive a zero (0) on work missed. Please have your teachers initial the last column after you get your assignments.

Student Name: _____ Date(s) of Absences: _____

COURSE	ASSIGNMENTS	TEACHER'S INITIALS