



## OUT-OF-DISTRICT STUDENT TRAVEL FORM

Student Name: \_\_\_\_\_

Student e-mail address: \_\_\_\_\_

Host Parent Name(s): \_\_\_\_\_

Host Parent Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Host Parent e-mail address: \_\_\_\_\_

Student will be traveling with: \_\_\_\_\_

Traveling To (Destination): \_\_\_\_\_

Departure Date: \_\_\_\_\_ Return Date: \_\_\_\_\_

Responsible adult traveling with or at destination  
if student is not traveling with host parent: \_\_\_\_\_

Address & phone number of above  
adult if not host parent: \_\_\_\_\_

Relationship of above adult to student or host parents:

Address & phone number where you can be reached in case of emergency while out of district:

### To be completed by the host family if student is traveling without them:

The student named above has my permission to travel out-of-district as described above. I have checked with the responsible adult at the intended destination and I am satisfied with the arrangements.

\_\_\_\_\_  
*Signature of Host Parent*

### To be completed by program staff:

- I approve these travel arrangements
- I cannot approve these travel arrangements
- Host family and student have been contacted:      By Phone       E-Mail

\_\_\_\_\_  
*Signature of International Program Staff Member*