



Family Educational Opportunity Form

Filling out this form does not automatically ensure approval. Several factors will be taken into consideration before granting approval including: Educational value of trip, school calendar timing, and student's academic standing in classroom.

Student's Name: _____

Grade: _____ Homeroom Teacher/Advisor: _____

Dates that student will be absent: _____

Total # of school days that will be missed: _____

(Please note: Maximum of 5 days per school year allowed for Ed. Opportunity)

Destination: _____

Please provide a brief description of the educational activities planned during your trip:

Please list any past approved family educational opportunity days taken during this current school year:

Destination: _____ # of school days missed: _____

Destination: _____ # of school days missed: _____

Parent Signature: _____ Date: _____

Approved

Not Approved

Director Signature: _____ Date: _____