

SAINT JOSEPH SCHOOL
420 East Simpson Street
Mechanicsburg, PA 17055
Ph: 717.766.2564
Fax: 717.766.1226

REQUEST FOR EDUCATIONAL TRIP 2025-2026

STUDENT : _____ GRADE: _____

DESTINATION: _____

DATE(S) OF ABSENCE: _____

EDUCATIONAL PURPOSE OF THE TRIP: _____

I understand that my child has the responsibility for making up any work that he/she may miss while on this trip. The deadline for completing this work will be five (5) school days from the date of our return. I also understand that my child will not receive any work in advance of his/her trip.

Parent's Signature

Date

() TRIP APPROVED

TRIP NOT APPROVED FOR THE FOLLOWING REASONS:

Rebecca A. Bamberger
Principal

(updated 8/20/25)

Date