

Central Consolidated School District

Group Travel Arrangement Information Form

(effective 8/1/2012)(revised 8/1/2014)

Name of Conference/Workshop: _____

Location of Conference/Workshop: _____

Dates of Conference/Workshop: _____

Travelers to Conference/Workshop:

Name of Attendee (as appearing on government issued ID)	Position (student/Staff/Chaperone)	School/Department	Date of birth (as appearing on government issued ID)

Attach copy of Board-approved travel for students.