Lead:

Co Lead: Today’s Date:

Additional Counselors:

Trip Title  Trip date/Dates:

Number of Students: Number of Chaperones:

Type of Vehicle Needed:

Sedan Mini Van(6 passenger+driver)

Suburban(8 passenger+driver) Van(12 passenger+driver)

Truck(5 passenger+driver) Trailer

Bus

Additional Bus Information: Number of Busses needed:

Departure Date:

Load Time: Return Date:

Depart Time: Load Time:

Loading Point: Depart Time:

Destination: Loading Point:

Expenses:

Name of Counselor Responsible Description of Expense Amount of Expense

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**Total Cost:**

**Important: Include a Travel Itinerary with this form**

Signature of Lead:

Percentage Allocation:

Total # students:

|  |  |  |  |
| --- | --- | --- | --- |
| Grant | Number of Students | Percentage Allocation | Grant Cost |
| Student support services/RTRI10 |  |  |  |
| ETS Southeast Idaho/RTRO12 |  |  |  |
| ETS Magic Valley/RTRO11 |  |  |  |
| Upward Bound/RTRO14 |  |  |  |
| Upward Bound Math/Science/RTRO15 |  |  |  |
| TRIO EOC/RTRO13 |  |  |  |
| TRIO McNair/RTRO16 |  |  |  |
| TRIO Veteren’s Upward Bound/RTRO17 |  |  |  |
| Other: LTRI06 |  |  |  |