

**Community School of Davidson
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: _____

Departure Date: _____

Return Date: _____

Total # of school days that will be missed: _____

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

Joy Warner, Director

Date