

COOPER HIGH SCHOOL FINE ARTS DEPARTMENT

PRE-APPROVED TRAVEL RELEASE FORM

This form must be turned in to your teacher/director **24 HOURS** before the scheduled activity for the request to be considered.

Today's Date: _____

Name: _____ Fine Arts

Class: _____

Date of requested travel
release: _____

What necessitates your request to travel other than school transportation
(be specific)?

Date & Time of
release/departure: _____

Who will you be traveling
with? _____

Student Signature: _____

Parent Signature: _____

Date requested was received: _____

Release approved

Release not approved

Approved by: _____

Comments: