



Central Okanagan International Education
School District No. 23 (Central Okanagan)
1040 Hollywood Road, Kelowna
British Columbia, Canada V1X 4N2
Tel. 250-470-3258 Fax 250-870-5188

TRAVEL REQUEST FORM

Date: _____

Student Name: _____

Parent's email: _____

Host Family: _____

Host Family contact phone: _____

*All international students in SD 23 must complete this form which is kept on file at Central Okanagan International Education when planning an independent overnight (or longer) trip outside the Central Okanagan OR when travelling with the Host family or school for a trip of longer than overnight or a long weekend outside the Central Okanagan. **This form must be faxed or emailed to the legal parents and signed.***

Trip Itinerary:

Departure Date and Time: _____

Method of Travel (including flight # if applicable) _____

Traveling with: _____

Destination (City and Country): _____

Contact name, address and telephone number (include area code and country code):

Please describe any other travel plans varying from the above mentioned destination. Include contact information (continue on back as necessary):

Returning Information:

Return Date and Time: _____

Method of Travel (including flight # if applicable): _____

We are the legal parents of this student and hereby give permission for this trip as outlined above. _____
