

# Mullin ISD

## School Activity Attendance Form

Campus \_\_\_\_\_

Date \_\_\_\_\_

Requesting Teacher's Name \_\_\_\_\_

\_\_\_\_\_ (Date of Trip) \_\_\_\_\_ (Departure Time) \_\_\_\_\_ (Return Time)

\_\_\_\_\_ (Destination)

Is this activity for:  Extra-Curricular Non UIL  Extra Curricular UIL  Visit Higher Ed Institution

\_\_\_\_\_ (Number of Student Participants)

Purpose of Trip/Link to Standard Course:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Names of Supervising Teachers and Parents:

Bus Driver Name:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approve  Disapprove

Principal \_\_\_\_\_  
(Signature)

\_\_\_\_\_  
Teacher Signature  
(Upon Departure from Campus)

\_\_\_\_\_:\_\_\_\_ AM/PM \_\_\_\_\_  
Time Date

\_\_\_\_\_  
Teacher Signature  
(Upon Arrival on Campus)

\_\_\_\_\_:\_\_\_\_ AM/PM \_\_\_\_\_  
Time Date

**\*\*\*\*Please staple Attendance Roster of students participating to the back of this form\*\*\*\***