

**ALFONSO B. PEREZ SCHOOL**

**COMMUNITY TRAINING NOTICE**

This notification form is to be turned in to the main office before leaving campus. Any change of plans or altering of route needs to be called in when in the community.

Teacher: \_\_\_\_\_ Cell #: \_\_\_\_\_ Room: \_\_\_\_\_

Destination: \_\_\_\_\_ Date of Trip: \_\_\_\_\_

Time of Departure: \_\_\_\_\_ Time of Return: \_\_\_\_\_

Method of Transportation: \_\_\_\_\_

Objective of Community Training: \_\_\_\_\_

\_\_\_\_\_

Students Participating in CT:

1. \_\_\_\_\_ 9. \_\_\_\_\_

2. \_\_\_\_\_ 10. \_\_\_\_\_

3. \_\_\_\_\_ 11. \_\_\_\_\_

4. \_\_\_\_\_ 12. \_\_\_\_\_

5. \_\_\_\_\_ 13. \_\_\_\_\_

6. \_\_\_\_\_ 14. \_\_\_\_\_

7. \_\_\_\_\_ 15. \_\_\_\_\_

8. \_\_\_\_\_ 16. \_\_\_\_\_

Adult Supervision for CT:

1. \_\_\_\_\_ 3. \_\_\_\_\_

2. \_\_\_\_\_ 4. \_\_\_\_\_

Students remaining at school:

Adult supervising student:

1. \_\_\_\_\_ \_\_\_\_\_

2. \_\_\_\_\_ \_\_\_\_\_