



Nova Scotia International Student Program

A consortium project of the Annapolis Valley Regional Centre for Education, Cape Breton-Victoria Regional Centre for Education, Chignecto-Central Regional Centre for Education, Conseil scolaire acadien provincial, Halifax Regional Centre for Education, South Shore Regional Centre for Education, Strait Regional Centre for Education, and Tri-County Regional Centre for Education in partnership with the Nova Scotia Department of Education and Early Childhood Development.

Student Travel Request Form

Dear Parent:

Your son/daughter _____ (name of student) has requested permission to travel. **Final approval for NSISP student travel must be provided by the NSISP Custodian or Designate.** Please provide the required information below so an appropriate decision for the request can be made. **Please note: All travel requests must be submitted at a minimum of 2 weeks prior to intended departure and before travel arrangements are made.**

TRAVEL INFORMATION	
Departure Date	Return Date
Destination	
Purpose of Travel	
Details of Transportation (air/train/bus/car)	
CHAPERONE INFORMATION	
Chaperone Name	
Relationship to Student	
Date of Birth (Month/Day/Year)	
Address	
Email	
Telephone/Cell	
<p>**Approved Chaperone must be 25 years or older, or at the discretion of the RCE/CSAP**</p> <p>Please attach photocopy of the chaperone's identification document if the chaperone is not the natural parents, host parents, or NSISP staff.</p>	

Authorization: By signing below, I (Legal Guardian) agree with my son/daughter's travel plans. I understand by signing this form, I will not hold the NSISP liable or responsible in any way whatsoever during this travel. I understand if the travel is outside of Canada, it is the traveller's responsibility to ensure they have the appropriate travel documents. I understand the traveller is responsible for organizing their own transportation back and forth to the point of departure (home to airport, etc) and any expenses related to this travel. If a drive is requested of a homestay parent, there may be a charge by the homestay parent to accommodate the transportation.

Signature (Natural Parent): _____ Date: _____

For Office Use Only
Travel Approved by NSISP Custodian or Designate: YES _____ NO _____
Signature: _____ Position: _____
Date: _____