



# The Seton Schools

Seton Academy  
23 St. Charles Street, Plattsburgh, NY 12901  
(518) 825-7386  
www.seton-academy.net

Seton Catholic Central  
206 New York Road, Plattsburgh, NY 12903  
(518) 561-4031  
www.setoncatholic.net

## STUDENT TRAVEL FORM

STUDENT NAME \_\_\_\_\_

The student will be traveling to: (City, State, Country) \_\_\_\_\_

He/She will be staying at/with: Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone (Include Country Code) \_\_\_\_\_

Dates: Leaving (MM/DD/YY) \_\_\_\_\_ Returning (MM/DD/YY) \_\_\_\_\_

Student is traveling:  Alone  Friend \_\_\_\_\_  Family Member \_\_\_\_\_

Mode of Transportation:  Car  Bus\*  Train\*  Plane\*

\* If traveling by bus, train, or airline, you **must** attach a copy of your printed travel itinerary.

**Host Parents:** Please make sure your student completes this form, attaches a copy of their travel itineraries, and has their natural parent(s) e-mail [teverleth@thesetonschools.org](mailto:teverleth@thesetonschools.org) or fax (518) 563-1193 written consent for these travel plans. If your student is planning on missing more than three (3) academic school days, they **MUST** have each of their teachers sign the back of this form after it has been completed.

HOST PARENT'S SIGNATURE: X \_\_\_\_\_

### PLEASE RETURN THIS FORM TO THE OFFICE OF INTERNATIONAL STUDENTS

\*\*\*\*\*FOR OFFICE USE ONLY\*\*\*\*\*

- Completed Travel Form
- Host Parent Signature (**Most important to know that Host Parents have researched and approve plans**)
- Printed Travel Itinerary if Applicable
- Faculty Signatures on Back if Applicable
- Natural Parents' Permission

#### NOTES:

DIRECTOR'S SIGNATURE: X \_\_\_\_\_