

**REQUEST FOR APPROVAL: FOREIGN TRAVEL WITH YOUTH**

**This form must be submitted as far in advance as possible to the appropriate person: For parish religious education trips, to the Director of Catechetical Ministry. For parish youth ministry events, to the Director of Youth Ministry. For schools, to the pastor and the Superintendent of Schools.**

\*\*\*\*\*

Name of sponsoring parish/school: \_\_\_\_\_

Name of contact person: \_\_\_\_\_ Will you have a cellular? \_\_\_\_\_

Address: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Type of activity(ies): \_\_\_\_\_

Dates: \_\_\_\_\_ Place: \_\_\_\_\_

**LOCATION INFORMATION:**

Name of Place / Organization: \_\_\_\_\_

Address: \_\_\_\_\_ Phone in U.S.A.: \_\_\_\_\_

Address while abroad: \_\_\_\_\_ Phone: \_\_\_\_\_

What is the purpose of the event? \_\_\_\_\_

\_\_\_\_\_

What else is occurring at the event when the group will be there? \_\_\_\_\_

What type of sleeping accommodations will be used? \_\_\_\_\_

\_\_\_\_\_

What are the ages of the children involved: \_\_\_\_\_ What will be the adult child ratio? \_\_\_\_\_

All adults fingerprinted? \_\_\_\_\_ What type of transportation will be used? \_\_\_\_\_

What type of training/preparation will be done in advance? \_\_\_\_\_

\_\_\_\_\_

Please describe the communications plan while traveling abroad: \_\_\_\_\_

\_\_\_\_\_

Do all participants and chaperones have travel documentation consistent with the policy on foreign

Travel: \_\_\_\_\_

What are your plans for access to medical treatment while abroad? \_\_\_\_\_

---

**Please include a list of names of the chaperones 18 and over who will be participating directly or indirectly on the foreign travel, also a list of the names of the young people participating.**

---

---

**For Diocese:**

**Approved by:** \_\_\_\_\_ **Date:** \_\_\_\_\_