

Glen Ellyn, IL 60137-6957

## **Community Trip Request Form**

Mary M. Furbush, Ed.D.

**Executive Director** 

Please complete this form and return to the CASE office at least 10 days prior to the trip.		
Trip Date		
Destination		
Requested by	Contact number	
Departure time from school		
Arrival time back to school		
Student Name	Equipment	District
Additional Notes		

## Lesson Plan form for a K-8 community based instruction must be filled out in its entirety

Destination:	
Teacher:	
Date of Trip:	
Standards that will be covered: Instruction ☐ Relation ☐ Development of Employment ☐ Other Post-School Functional Vocational Evaluation ☐ Description:	ool Adult Living   Daily Living Skills and
What goal do you intend to accomplish during this comm	munity outing experience:
Teacher Signature	Date
Designee Signature	Date