JC-110

Exp. 07/2029 Rev. 07/2024

The School District of Jackson County Marianna, FL 32447

Out of State

Travel Request Form

Permission to Travel with Students Out of Jackson County Permission to Travel with or without Students Out of the State of Florida

DIRECTIONS: As required by state law, prior to any travel Out of County/State, permission must be obtained from the Superintendent of Schools or designee). Fax the completed form to 482-1299. Once approved, a copy will be faxed to the appropriate school and/or Transportation Department.	
OUT OF COUNTY TRAVEL BY EMPLOYEES ONLY: when an employee travels out of Jackson County, but within the State of Florida, and students are not involved in the trip, this form is not required.	
The employee must complete and have district approval on a JC-001 (Application for Leave) prior to any out of county/out of state travel. If the employee's travel is out of state, this form is required.	
ICSB SCHOOL: Malone DATE: 5/27/25	
MULTI-DATE/MULTI-LOCATION EVENTS (SUCH AS REGULAR SEASON FOOTBALL, BASKETBALL, ETC): MULTI-DATE/MULTI-LOCATION SCHEDULE OF EVENTS IS ATTACHED: Staff trip Continue to complete applicable information below.	
DESTINATION: (Name of Location) Patricia Lanes, Dothan, AL	
ADDRESS: 2208 Ross Clark Circle	
CITY: Dothan STATE: AL	
DATE OF DEPARTURE: 5/27/25 DATE OF RETURN: 8:30 am	
SPECIFIC PURPOSE FOR TRAVEL: Staff trip	
WILL STUDENTS BE TRAVELING YES NO IF YES, APPROXIMATE NUMBER OF STUDENTS	
STUDENTS WILL BE TRANSPORTED BY:	
LIST THE NAME(S) OF ALL EMPLOYEES WHO WILL BE TRAVELING: All Malone School staff/employees PRINCIPAL'S APPROVAL: (Signature of Principal)	
FAX THIS FORM TO 482-1299 FOR SUPERINTENDENT'S APPROVAL	
COUNTY OFFICE USE	
PERMISSION IS GRANTED • If "Granted", approval is contingent on vehicle and/or driver availability. Regular bus routes will be FIRST priority and may take precedence over a scheduled extra-durricular trip. DATE: SUPERINTENDENT'S SIGNATURE: RETURN FAX TO SCHOOL FAXED TO TRANSPORTATION (if needed)	

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CSB SCHOOL: Cottondale High D	ATE: 5/27/2025
MULTI-DATE/MULTI-LOCATION EVENTS (SUCH AS REGULAR SEA MULTI-DATE/MULTI-LOCATION SCHEDULE OF EVENTS Continue to complete applicable information belo	
DESTINATION: (Name of Location) Camp John Hope FFA	Center
ADDRESS: 281 Hope Entrance Road	
CITY: Fort Valley	STATE: GA
DATE OF DEPARTURE: 7/28/2025	DATE OF RETURN: 8/01/2025
SPECIFIC PURPOSE FOR TRAVEL: Annual FFA Officer Retr	eat
WILL STUDENTS BE TRAVELING X YES NO	IF YES, APPROXIMATE NUMBER OF STUDENTS 13
STUDENTS WILL BE TRANSPORTED BY: BUS CONTINUED B	
LIST THE NAME(S) OF ALL EMPLOYEES WHO WILL BE TRAVEL	ING: Stan Scurlock
PRINCIPAL'S APPROVAL: (Signature of Principal)	
FAX THIS FORM TO 482-12	99 FOR SUPERINTENDENT'S APPROVAL
COUNTY OFFICE USE	
PERMISSION IS GRANTED If "Granted", approval Regular bus routes will be FIRST priority and m DATE:	ls contingent on vehicle and/or driver availability. ay take precedence over a scheduled extra-curricular trip.

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