



# YAMPAH MOUNTAIN HIGH SCHOOL INTERIM TRIP APPLICATION

*THE FOLLOWING APPLICATION IS REQUIRED TO BE SUBMITTED PRIOR TO ACCEPTANCE ON ANY INTERIM TRIPS. INTERVIEWS WILL BE CONDUCTED AFTER SUBMISSION OF APPLICATION. STUDENTS WILL BE NOTIFIED OF ACCEPTANCE ON INTERIM TRIPS AFTER AND ARE NOT PERMITTED TO ATTEND PRIOR*

**INTERIM TRIP OFFERINGS:** Trimester \_\_\_\_\_ Year \_\_\_\_\_

**STUDENT NAME :** \_\_\_\_\_

**OFFERINGS: PLEASE LABEL YOUR CHOICE PREFERENCES STARTING WITH 1 AS YOU FIRST CHOICE.**

PREFERENCE	INTERIM TRIP OFFERINGS	\$ COST

## APPLICATION QUESTIONS (ALL REQUIRED)

**1. Have you participated in other interim experiences? YES NO**

**If yes, please list:**

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**2. Why do you want to go on your first choice interim?**

### 3. WHAT ARE YOUR EXPECTATIONS OF THE INTERIM?

Please specify:

- What do you expect to learn and do:
  
- What do you expect of yourself:
  
- What do you expect of other students:
  
- What do you expect of the Advisor or Trip Leader:

4. Can you pay for the entire cost of the trip? Yes    \*No  
If \*No, what can you afford to pay? \_\_\_\_\_ How else could you contribute to the cost of the trip?

5. How are you doing in school, currently at Yampah? Please include attendance, grades, work completion participation in your response:

6. Do you have any legal issues that would impact your ability to participate in an interim? Yes No. If yes, please explain further:

7. Have you had or do you have any drug or alcohol issues that might impact your participation on an interim experience? Yes No If yes, please explain further:

8. Do you have any work, school (CMC) or other personal issues that might impact your participation on an interim experience? Yes No If yes, please explain further:

9. What questions do you have?

10. *We take drug, alcohol and other student conduct expectations very seriously, with a particularly heightened responses on interim trips to ensure the safety of all. Please sign this application, that you understand that you personal belongings are subject to search if concerns are suspected and that any drug, alcohol or substance issue will result in being sent home from the trip at the cost to the student and family and may result in dismissal from Yampah Mountain High School:*

I understand this policy and requirements of interim participation: \_\_\_\_\_

Student Signature

\*Parent/Guardian Contact: \_\_\_\_\_

Name

phone number

email

\*If accepted for the interim, parent/guardian will be called for recommendation & permission.

The final part of the application is your Advisor recommendation. Please give this completed application to your Advisor:

*I recommend this Advisee for participation on the interim of their choice:* YES NO UNSURE

Advisor Siganture \_\_\_\_\_ Date: \_\_\_\_\_

ADVISOR NOTES: