



MARION MILITARY INSTITUTE

Marion, Alabama
Travel Roster



Date of Trip: _____

Departure Time: _____ Return Time: _____

Destination: _____

Purpose of Trip: _____

Faculty/Staff Sponsor(s): _____

Chaperone(s): _____

Students Name	
1.	31.
2.	32.
3.	33.
4.	34.
5.	35.
6.	36.
7.	37.
8.	38.
9.	39.
10.	40.
11.	41.
12.	42.
13.	43.
14.	44.
15.	45.
16.	46.
17.	47.
18.	48.
19.	49.
20.	50.
21.	51.
22.	52.
23.	53.
24.	54.
25.	55.
26.	56.
27.	57.
28.	58.
29.	59.
30.	60.
Athletic Director Signature (required for all Athletic trips)	
APPROVED _____	DISAPPROVED _____
Dean's Signature (required for Academic Trips)	
APPROVED _____	DISAPPROVED _____
Commandant's Signature (required for all non-Academic/Athletic trips)	
APPROVED _____	DISAPPROVED _____

*Please drop a copy of the travel roster off at the Commandant's Office as you depart campus.