

School Name	
Actual No. of graduates participated in the trip	
Actual No. of accompanying teachers	
Travel dates	From _____ / _____ / _____ to _____ / _____ / _____ Year (yyyy) Month (mm) Day (dd) Year (yyyy) Month (mm) Day (dd)
Travel destination	
Summary of the activities	
Name and telephone number of the contact person	

Item of income	Amount	Item of expenditure	Amount
Total		Total	

Date _____ / _____ / _____
Year (yyyy) Month (mm) Day (dd)

Signature of person in charge of school
and school seal

Note: The original or school-verified copies of the receipts of travel expenses as well as group pictures of participating students must be submitted together with this report. The final amount of the subsidy is calculated in accordance with the actual number of people participated in the trip.