# The Lifelong Learning Institute
At Waubonsee Community College

## Outing/Trip Proposal

### Outing/Trip Information

- [ ] Outing  [ ] Day Trip  [ ] Multi-Day Trip
- [ ] Fall  [ ] Spring  [ ] Summer  Year: ____  Date submitted: ____ (mm/dd/yy)

- [ ] Trip Manager makes all arrangements and follows trip guidelines.
- [ ] LLI Trip Coordinator to make all arrangements.

<table>
<thead>
<tr>
<th>Trip Title:</th>
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<tbody>
<tr>
<td>LLI Seminar Connection:</td>
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</table>

### Outing/Trip Manager(s)

<table>
<thead>
<tr>
<th>Trip Manager:</th>
<th>Assistant on Trip:</th>
</tr>
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<tbody>
<tr>
<td>Best phone to reach you:</td>
<td>Best phone to reach you:</td>
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<td>Best email to reach you:</td>
<td>Best email to reach you:</td>
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### Trip Planning Checklist:

- [ ] Deadline required allowing time for Invoices and checks to be processed: ________ (mm/dd/yy)
- [ ] Copy of Proposal and Business Plan sent to LLI Trip Coordinator
- [ ] Vendor Contract(s), Agreement(s) and/or Confirmation Letter(s) sent to WCC/LLI Liaison – Barb Jachna
- [ ] Vendor Form(s) and W9(s) completed and turned in to WCC Business Office.
- [ ] Final Count given to site(s)
- [ ] Invoice(s) received from site(s) and in WCC hands to process check(s) on time (6 weeks)
- [ ] Three sets of Trip Releases. 1. Trip Manager, 2. Trip Assistant, 3. Barb Jachna WCC Liaison
- [ ] Send to Barb Jachna  **bjachna@waubonsee.edu**  FAX 630-466-9495  PHONE 630-466-6804

| Submit Trip Proposal to: Barb Jachna  **bjachna@waubonsee.edu**  Waubonsee Community College  Rte. 47 @ Waubonee Drive  Sugar Grove, IL 60554  630-466-6804  bjachna@waubonsee.edu |
# Outing/Trip Details

<table>
<thead>
<tr>
<th>Trip Title</th>
<th>Trip Manager(s)</th>
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</table>

Concise description of Outing/Trip for LLI catalog copy: (Maximum 90 words)

[Blank lines for description]

Word Count ___

Maximum Attendees: ___

Outing/Trip Objective for LLI catalog copy: (Maximum 25 words)

[Blank lines for objective]

Word Count ___

## Date of Outing/Trip

Date: ________ (mm/dd/yy)

- [ ] Travel on Own
- [ ] Motorcoach

Time of Departure / Location  ____________________________________________

Time of Return / Location  ____________________________________________

Number of participants: Minimum ___  Maximum ___

Cost: _________

Includes: ____________________________________________________________

2016Aug16 rrg