

SACRAMENTO CITY UNIFIED SCHOOL DISTRICT BOARD OF EDUCATION

Agenda Item 9.1e

Meeting Date: October 20, 2016

<u>Subject</u>: Approve Rosemont High School Field Trip to Las Vegas, Nevada, from October 27-31, 2016

- Information Item Only
 - Approval on Consent Agenda
 - Conference (for discussion only)
 - Conference/First Reading (Action Anticipated: _____)
-] Conference/Action
- Action

Public Hearing

Division: Deputy Superintendent

<u>Recommendation</u>: Approve Rosemont High School Field Trip to Las Vegas, Nevada, October 27-31, 2016

Background/Rationale: October 27-31, 2016, four students from Rosemont High School will be accompanied by one certificated chaperone, one classified chaperone, and one parent chaperone, to Las Vegas, Nevada, to complete in the Meadows Debate Tournament.

Financial Considerations: Sacramento Urban Debate League will cover all costs.

LCAP Goal(s): College, Career and Life Ready Graduates

Documents Attached:

1. Out of State Field Trip Documents

Estimated Time of Presentation: N/A Submitted by: Lisa Allen, Interim Deputy Superintendent Olga Simms, Area Assistant Superintendent Approved by: José Banda, Superintendent

Print Fo	orm
Sacramento City Unified School District FIELD TRIP REQUEST FORM (USE A SEPARATE FORM FOR EACH TRIP)	
Parent Permission Form required for <u>each</u> student field trip, See reference distribution section for details concerning each type of trip. School Name <u>ROSEMONT HIGH SCHOOL</u> Date <u>9/23/16</u>	
Teacher's Name STEPHEN GOLDBERG Room # Telephone # 712-0782 Fax # 551-2195 Fax # 551-2195	
Field Trip Destination LAS VEGAS, NV	
Local (50 mile radius) Out-of-Town (Beyond 50 mile radius) 🗹 Overnight	
✓ Out-of-State/Country ☐ Involving Swimming or Wading ☐ Unusual Activities Route _HIGHWAY 5 > HIGHWAY 99 > I-15 > LAS VEGAS	
Educational nature of field trip/excursion SPEECH AND DEBATE	
Depart Date <u>10/27/16_Time</u> 9:00 AM_am/pm Return Date <u>10/31/16_Time</u> 8:00 PM_am/pm	
TRANSPORTATION will be provided by: Walking School Bus – Contact Transportation Field Trip Office Chartered Bus Company Certified: yes no – Check Risk Management Web Site Private Vehicle – Complete Volunteer Personal Automobile Use Form for each vehicle and driver. Parent Driver – Must have fingerprint clearance, check with Volunteer Office. Faculty Driver – Complete Volunteer Personal Automobile Use Form for each vehicle and driver. Public Transportation Public Transportation Train Commercial Airline Funding Source SAC URBAN DEBATE Financial Assistance Available?	
Number of students participating: <u>4</u>	
Adult Supervisors/ Drivers: DRIVER DRIVER 1) THUY DAO (PARENT) yes no 2) yes no 3) MARK HERNANDEZ (STAFF) yes no 4) yes no	
Teachers and Staff Attending:	
1) STEPHEN GOLDBERG yes I no 2) yes no	
3) yes no 4) yes no	
Principal Approval Clup bish (Vight Difference Date	
Risk Management Approval (Unusual Activities)	
Segment Administrator Approval	
Distribution: Refer to Field Trip Information Form RSK 106F for the forms and distribution required for each trip:	
 Local Trip: (50 mile radius) - Submit to Principal for approval. Maintain all documents at site. <u>Out-Of-Town</u>: (beyond 50 mile radius) - Submit to Principal for approval then forward to Segment Administrator 10 days prior to trip. <u>Overnight Trip:</u> Submit to Principal for approval then forward to Segment Administrator 10 days prior to trip. <u>Trip Involving Swimming or Wading</u>: Submit to Principal for approval then forward to Segment Administrator 10 days prior to trip. <u>Trip Involving Unusual Activities</u> (Water sports or high risk activities such as rafting, snorkeling, rock climbing, skiing, etc.) - Submit to Principal for approval then forward to Segment 6 weeks prior to trip. Must purchase Special Event Liability Insurance. 	
 Out-of-State/Country: Submit to Principal for approval then forward to Segment Administrator and Risk Management SIX (6) WEEKS prior to trip. Must have Superintendent and Board approval prior to trip. Segment Administrator will submit for Board Agenda. Trips not submitted to Segment Administrator 6 weeks prior to trip will be considered <u>automatically rejected by the Board.</u> 	

Maintain a copy of all forms at site for 2 years. Approved forms will be returned by Segment Administrator

8/20/07 Rev C

Field Trip Request Form RSK-F106A

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Sacramento City Unified School District OUT-OF-STATE OR OUT-OF-COUNTRY TRAVEL REQUEST

School Name ROSEMONT HIGH SCHOOL Date Date 7/26/16 Teacher's Name STEPHEN GOLDBERG Room #____ Telephone # 712-0782

Field Trip Destination

Reason for travel meadows DEBATE TOURNAMENT

List unusual activities, water activities or high risk activities (examples: rafting, snorkeling, rock climbing, skiing, etc.) as a special parent waiver may be required. Submit copy of contract or waiver for review before signing. Risk management approval required.

Attach a detailed itinerary for each day: <u>PLEASE SEE ATTACHMENT</u>

Signed

Approvals: Principa dem Seament Adminic 101 3 Superintendent Date

Board Approval Date

Request to Attend:	Purpose for Atten	o City Unified School Distri	Instructions: This form must be completed and received in Accounts Payable at least 30 days prior to the proposed trip- 60 days if out-of-state.	
Conference/Workshop	F Professional Deve	lopment		
Business Meeting	Continued Education	on Credits Earned		
School/Department Rosemont High	School	······································	 Date 9/6/16	
Date(s) of Event 10/27-10/31	Loca	ation Las Vegas		
Event Title (attach brochure)	leadows Debate Tournament	·····		
Purpose" Ithis event lies in the hard prepares our students for *(what value does this activity give stu	work and preparation that our tea college and the world beyond in dents, attendees, staff, department strict's strategic plan2 It alligns w	am engages in in order to prepa wavs that are hard to quantify. /site or community?) ith the district's startegic plan in	Debate Tournament in Las Vegas Nevada. The valuare for the highly competitive tournament. Debate n that it is student centered, rigorous, academic and s of argumentation and critical thinking.	
How will this activity/event be used a Name of Attendee(s) (attach sheet for additional a	nd shared? Students will return	to work with novice members	of the team to further instruct them in debate skills. e No. of Days Budget Code	
MARK HERNANDEZ				
**IF A SUBSTITUTE IS NEEDED, S Approvats:	END A COPY OF THIS FORM T		Additional Attendees Attached	
XChN	J.PREDRO	9/26/16	Registration Fee ***	
Principal/Department/Head Sign	ature & Print Name	Date	Meals included?	
allow of Alm	ms)	9/26/16		
Cabinet Level on Designee Signa	ature	an alu	Lodging Transportation	
Chief Business Officer Signature)	Date	Meals	
X) Jude		10/3/16	Other	
Superintendent or Designee Sig	nature	Date		
Categorical	Budget Code(s):	· L	<u> </u>	
General Fund/Unrestricted		· · · · · · · · · · · · · · · · · · ·	\$ 0	
***If any meals are included in the	cost of registration, how many	of each: Breakfast	Lunch Dinner	
		tment unless prior arrangem	ents have been made (with AP) to pick up check Dollar Amount	
Registration Fee	·	•		
Hotel			1000011 1 1	
Alafa ****		<u></u>		
Airfare **** Car Rental ****				

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