

## SACRAMENTO CITY UNIFIED SCHOOL DISTRICT BOARD OF EDUCATION

Agenda Item#\_\_9.1e\_\_\_

Meeting Date: March 6, 2014	
Subject: John F. Kennedy High School Field Trip to Ashland, Oregon, Mar 7-9, 2014 to attend the Shakespeare Festival	ch
☐ Information Item Only   ☒ Approval on Consent Agenda   ☐ Conference (for discussion only)   ☐ Conference/First Reading (Action Anticipated:)   ☐ Conference/Action   ☐ Action   ☐ Public Hearing	
<u>Division</u> : Chief of Schools	
Recommendation: Approve John F. Kennedy High School Field Trip to Ashland, Oregon, March 7-9, 2014	ı
<u>Background/Rationale</u> : March 7-9, 2014 students from John F. Kennedy High School PA will travel to Ashland, Oregon to see two plays at the Shakespeare Festival. A chartered b will provide transportation for the 30 students, 1 teacher chaperone, and 2 parent chaperor Students will be accompanied by chaperones to all plays. Students and chaperones will st Southern Oregon University dorms.	us nes.
<u>Financial Considerations</u> : No cost to the district. Expenses paid through parent contributand fundraising.	tion
<u>Documents Attached:</u> Out of State Field Trip Documents	
Estimated Time of Presentation: N/A	
Submitted by: Lisa Allen, Chief of Schools	

Approved by: Sara Noguchi, Ed. D., Interim Superintendent

#### ·Sacramento City Unified School District

### FIELD TRIP REQUEST FORM

(USE A SEPARATE FORM FOR EACH TRIP)

Parent Permission Form required for each students School Name John F. Kennedy/PA	dent field trip, See refere CE	nce distribution section for DateF	details concerning each type of trip eburary 4, 2014
Teacher's Name Ms. Emily Sommer			Telephone #433-5200
Field Trip Destination Oregon Shall	kespeare Festival, A	Ashland, OR	Fax # <u>433-5511</u>
☐ Local (50 mile radius) ☑	Out-of-Town (Be	eyond 50 mile radiu	us) 🗌 Overnight
Out-of-State/Country Route 1-5N to Or-66 exit to Ashland St/I	☐ Involving Swir Right on Siskiyou B	mming or Wading 🔲	Unusual Activities
Educational nature of field trip/excursion P	erforming art/drama		
Professional States of the Sta		TARRIUM TO THE TARREST TO THE TARRES	
Depart Date 3/7/14 Time 8:15am ar	n/pm	Return Date 3/9/14	Time 4:00pm am/pm
TRANSPORTATION will be provided by Chartered Bus Company Certiff Private Vehicle - Complete Volume Parent Driver - Must have fingery Faculty Driver - Complete Volume Public Transportation Train	ied: yes _[ inteer Personal Automoti print clearance, check with teer Personal Automobil	no - Check Risk Mana bile Use Form for each vehi ith Volunteer Office. e Use Form for each vehic	ngement Web Site icle and driver. ele and driver.
Funding Source private donations	M British (1945)	_ Financial Assistanc	ce Available? • yesno
Number of students participating: 30	The second secon		•
Adult Supervisors/ Drivers:	DRIVER	•	DRIVER
Bridget Parsh     David Reynen	yes • no 2	2)	yes no
Teachers and Staff Attending:			
1) Emily Sommer 3)	yes no 4	)	ves _ no
Principal Approval	C S JI J J J J J J J J J J J J J J J J J	- HA	Date 2/6/14
Risk Management Approval (Unusual Activ Segment Administrator Approval	(iles)	Siry Valle	Date 2/6/19
Distribution: Refer to Field Trip Information Form R	SK 106F for the forms and	distribution required for each	trip:
<ol> <li>Local Trip: (50 mile radius) - Submit to Princip Out-Of-Town: (beyond 50 mile radius) - Submit 3.</li> <li>Overnight Trip: Submit to Principal for approva Irip Involving Swimming or Wading: Submit to Trip Involving Unusual Activities (Water spot to Principal for approval then forward to Segment Liability Insurance.</li> <li>Out-of-State/Country: Submit to Principal for approval the principal for approv</li></ol>	to Principal for approval to then forward to Segment o Principal for approval the ts or high risk activities at Administrator and Risk oproval then forward to Se oval prior to trip. Segmen	hen forward to Segment Admin Administrator 10 days prior to en forward to Segment Admin such as rafting, snorkeling, Management 6 weeks prior to gment Administrator and Risk I Administrator will submit for	o trip. istrator 10 days prior to trip. , rock climbing, skiing, etc.) - Submit o trip. Must purchase Special Event

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

### TRAVEL REQUEST FORM (ACC-F014)

Sacramento City Unified School District

Request to Attend:  Conference/Workshop	Purpose for Attending:  Professional Development			completed and received in Accounts Payable at least 30 days prior to the proposed trip- 60 days if out-of-state.			
Business Meeting	Continued Educa	ation Credits Earne	d	REQ#	Account Street Fit Hagyary Strawe	de carrier to the carrier of the car	
School/Department John F. Kenned	//PACE		The second secon	T (	Date	February 4, 2014	
Date(s) of Event March 7,8,9, 2014	L.C	ocation SOU Ashlar	nd, Oregon	en e	***************************************	en er para manana (e. 17 de de vel de vel de var en de de verper den 23 de vell y la republique de que popular	
Event Title (attach brochure)	THE RESERVE OF THE PROPERTY OF	de la femanda estado en estado en estado en estado en entre en entre en entre en entre en entre en entre en es	والمناهبين والمارة والمناهبين والمناهبين والمناهبين والمناهبين والمارة والمارة والمارة والمارة والمارة والمارة	reduceron (1) ( 1004 ) à l'entrepaire, i décès des l'étres des des décès de l'étres de l'étres de l'étres de l	The Part of the Part of the State of the Sta	TTT TO THE STATE OF THE STATE O	
Attend Oregon Shakesper	are Festival and attend Shakes	speare plays and work	shops	<del>nepoleografia de</del> de la Sentida de Presida de Sente de S	MANAGEMENT OF THE PARTY OF THE		
*(what value does this activity give stud	lents, attendees, staff, departme	ent/site or community?)		and the second section of the sectio	a produce and an ability of the graph of the state of the graph of the state of the graph of the state of the	Mile and a state of the state o	
How does this travel align with the Dis	trict's strategic plan? Perform	ing art/drama					
How will this activity/event be used ar Name of Attendee(s) (attach sheet for additional at	l	Position	Substitute No	. of Days equired		get Code substitute)	
Emily Sommer	Teachers		Yes	L. L.	oili JFK/PA(		
			No	ļ	oría Drive		
			No	Sacrame	ento, CA 9	5831	
			No	<u> </u>			
Tomas receive a green providence of Address Ad		**************************************	No		<u> </u>		
"IF A SUBSTITUTE IS NEEDED, S	END A COPY OF THIS FORM	A TO PERSONNEL, B				endees Attached	
Approvals:	1	alul.	Distric	ct cost for all att		**************************************	
Charl L	Jung	2/5/19			tration Fe	ee ***	
Principal/Department/Bead Signa	ture & Print Name	2 / 6 / /	В	Meals include	L	J 	
Cabinet/Level or Designee/Signa	ure	Date.	. #	dging ansportation	-	· · · · · · · · · · · · · · · · · · ·	
Chief Business Officer Signature	1. 1.	Date	Me	WHITMAN		Over 16 to 6 mar manage	
		2/19/14	Oil	****		No. of Section	
Superintendent or Designee Sign	ature	Date		TOTAL	0	At the same respect	
Categorical B	udget Code(s):			\$			
General Fund/Unrestricted	***************************************	7 P V 110 P 1100-1100-1100-1100-1100-1100-110		\$		and the state of t	
***If any meals are included in the o	ost of registration, how man	y of each: Breakf	ast	Lunch	Din	ner	
Prepayment Requested: All checks	MAN		***************************************				
·	Requis			lar Amount	,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Registration Fee	***************************************						
Hotel Airfare ****	***************************************		***************************************	10000			
Car Rental ****	V010//	A MICHAEL PROPERTY OF THE PROP	**************************************				
A CAMPAGE AND A			1976 beauty and a second secon			2.4.14 W	
**** If airfare or car rental is reques	ted, send a copy of this fo	rm to Purchasing, B	ox 830		and the first of the processing of	<del>2-11-100-</del>	
Rev.F 3-22-11		ACC-F014	THE SHARE SEA OF SECTION SECTI	75 (************************************		Page 1 of 1	

Print Form

Submit by Email

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

School Name John F. Kennedy High S	-Date March 7-9, 2014		
Teacher's Name Emily Sommer	Room # 303	Telephone #433-5200	
Field Trip Destination Ashland, Oregon	n		
Reason for travel Students will gain	a greater understar	nding of Shakespeare	
writings by seeing a live performa	ance of his novel		
- Marian Carana Car			
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List unusual activities, water activities rock climbing, skiing, etc.) as a special contract or waiver for review before sig	l parent waiver may be	required. Submit copy of	
Attach a detailed itinerary for each day			
Signed			
Teacher			
Approvals:	215/4		
Principal	Date /		
Risik Management Dept.	Date		
Segment Administrator	2/6/14 Date		
Superior tendent J	2/19/14 Date		
Board Approval Date			