



SACRAMENTO CITY UNIFIED SCHOOL DISTRICT BOARD OF EDUCATION

Agenda Item# 10.1g

Meeting Date: March 5, 2020

Subject: Approve School of Engineering and Sciences Field Trip to Reno, NV
from March 13 through March 15, 2020

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

Division: Academic Office

Recommendation: Approve School of Engineering and Sciences Field Trip to Reno, NV from March 13 through March 15, 2020.

Background/Rationale: On March 13, 2020, a group of 5 students and 3 adult chaperones from School of Engineering and Sciences will travel via automobile to Reno, Nevada to attend a Kiwanis International Student Conference.

Financial Considerations: No cost to the district.

LCAP Goal(s): College and Career Ready Students

Documents Attached:

1. Out of State Field Trip Documents

<p>Estimated Time of Presentation: N/A</p> <p>Submitted by: Christine Baeta, Chief Academic Officer Chad Sweitzer, Instructional Assistant Superintendent</p> <p>Approved by: Jorge A. Aguilar, Superintendent</p>

Sacramento City Unified School District
FIELD TRIP REQUEST FORM
 (USE A SEPARATE FORM FOR EACH TRIP)

Parent Permission Form is required for each student field trip. See below reference distribution section for details concerning each type of trip.

School Name School of Engineering and Sciences Date January / 21 / 2020

Teacher's Name Kacie Go Room # C14 Telephone # 395-5040
 Fax # 433-2959

Field Trip Destination Reno, Nevada DCon Conference

- Local-50 mile radius (bus/walking) Local-50 mile radius (driver led trips) Out-of-Town (Beyond 50 mile radius)
(forward directly to Field Trip Office)
- Overnight Out-of-State/Country Involving Swimming or Wading Unusual Activities

Route I-80 West to Reno, exit 15 US-395 for Carson City, exit 66 for Mill Street (resort on left)

Educational nature of field trip/excursion Kiwanis Club DCon Conference Students will build leadership skills, participate in a caucus, and participate in workshops

Depart Date 3 / 13 / 20 Time 11:30am am/pm Return Date 3 / 15 / 20 Time 3:00pm am/pm

- TRANSPORTATION will be provided by: Walking School Bus - contact Transportation Field Trip Office
- Charter Bus Company (certified): Yes No - Check with Field Trip Office
- Private Vehicle/Parent Driver/Faculty Driver - Complete Volunteer Personal Automobile Use Form for each vehicle and driver, must have fingerprint clearance (check with Human Resources for fingerprint clearances)
- Public Transportation Train Commercial Airline Other: 4 Rental Vehicles/1 Personal Auto

Funding Source: Students and Kiwanis Club Financial Assistance Available? Yes No

Number of students ^{NO COST TO SCUUSD} participating: 5

Adult Chaperones/Drivers: Use additional forms if more than 4 names

- | | | | |
|----------------|--|--------------|--|
| | DRIVER | | DRIVER |
| 1) James Hoong | <input type="checkbox"/> yes <input type="checkbox"/> no | 2) Sandy Ito | <input type="checkbox"/> yes <input type="checkbox"/> no |
| 3) _____ | <input type="checkbox"/> yes <input type="checkbox"/> no | 4) _____ | <input type="checkbox"/> yes <input type="checkbox"/> no |

Teachers and Staff Attending: Use additional forms if more than 4 names

- | | | | |
|----------------|--|----------|--|
| 1) Jamie Gomez | <input type="checkbox"/> yes <input type="checkbox"/> no | 2) _____ | <input type="checkbox"/> yes <input type="checkbox"/> no |
| 3) _____ | <input type="checkbox"/> yes <input type="checkbox"/> no | 4) _____ | <input type="checkbox"/> yes <input type="checkbox"/> no |

Principal Approval [Signature] Date 1-31-20

Risk Management Approval (Unusual Activities) [Signature] Date 2-12-20

Segment Administrator Approval [Signature] Date 2-18-20

Distribution: Refer to the Field Trip Information Form RSK 106F for the forms and distribution required for each trip:

- Local Trip (school or charter bus): (50-mile radius) - Submit to Principal for approval. Maintain all documents at site and forward a copy to Segment Administrator for approval.
- Local Trip: (50-mile radius: driver led) - Submit driver led trips to Principal for approval then forward to Segment Administrator for approval 6 weeks prior to trip.
- Local Trip: (waling, RT, Amtrak): Submit walking trips to Principal for approval then forward to Segment Administrator for approval 2 weeks prior to trip.
- Out-of-Town: (beyond 50-mile radius) - Submit to Principal for approval then forward to Segment Administrator for approval 6 weeks prior to trip.
- Overnight Trip: Submit to Principal for approval then forward to Segment Administrator for approval 6 weeks prior to trip.
- Trip Involving Swimming or Wading: Submit to Principal for approval then forward to Segment Administrator for approval 6 weeks prior to trip.
- Trip Involving Unusual Activities (Water sports or high risk activities such as rafting, snorkelling, rock climbing, sking, etc.) - Submit to Principal for approval then forward to Segment Administrator for approval 6 weeks prior to trip. This may require Special Event Liability Insurance.
- Out-of-State/Country: Submit to Principal for approval then forward to Segment Administrator for approval 6 weeks prior to trip. Must have Superintendent, Board of Education and Risk Management approval prior to trip. Segment Administrator will place field trip item on Board Agenda. Trips not submitted to Segment Administrator 6 weeks prior to trip will be considered automatically rejected by the Board of Education.
- Approved forms will be returned by Segment Administrator. Maintain a copy of all forms at site for 2 years.

TRAVEL REQUEST FORM (ACC-F014)

Sacramento City Unified School District

Request to Attend: <input type="checkbox"/> Conference/Workshop <input type="checkbox"/> Business Meeting	Purpose for Attending: <input type="checkbox"/> Professional Development <input type="checkbox"/> Continued Education Credits Earned	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. REQ # _____
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School/Department School of Engineering and Sciences Date January 10th, 2020

Date(s) of Event 3-13/3-15, 2020 Location Reno, Nevada

Event Title (attach brochure) Kiwanis Club DCon Conference

Purpose* Build leadership skills and learn how to participate and run a caucus.

*(what value does this activity give students, attendees, staff, department/site or community?)

How does this travel align with the District's strategic plan? College and Career Readiness/ help students invest in their community

How will this activity/event be used and shared? Shared with students, staff and community

Name of Attendee(s) <small>(attach sheet for additional attendees)</small>	Position	Substitute (Y/N)**	No. of Days Required	Budget Code <small>(for substitute)</small>
Jamie Gomez	Supervising staff	No		N/A
James Hoong	Kiwanis Advisor	No		N/A
Sandy Ito	Kiwanis Advisor	No		N/A
		No		
		No		

****IF A SUBSTITUTE IS NEEDED, SEND A COPY OF THIS FORM TO PERSONNEL, BOX 770** Additional Attendees Attached

Approvals: Principal/Department Head Signature & Print Name: <u>Chad Switzer</u> Date: <u>2-18-20</u> Cabinet Level or Designee Signature: <u>Chad Switzer</u> Date: <u>2/24/20</u> Chief Business Officer Signature: <u>Chad Switzer</u> Date: <u>2/25/20</u> Superintendent or Designee Signature: <u>Chad Switzer</u> Date: <u>2/28/20</u>	District cost for all attendees (estimate) Registration Fee *** <u>0.00</u> Meals included? <input type="checkbox"/> No B <input type="checkbox"/> L <input type="checkbox"/> D <input type="checkbox"/> Lodging <u>0.00</u> Transportation <u>0.00</u> Meals <u>0.00</u> Other <u>0.00</u> TOTAL \$ 0.00
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Categorical Budget Code(s): No cost to school - NO COST TO SCUSD \$ 0.00
 General Fund/Unrestricted NO REIMB. WILL BE SOUGHT BY ATTENDEES. ALL COSTS AND ANY REIMB. WILL BE HANDLED BY KIWANIS \$ _____

****If any meals are included in the cost of registration, how many of each:** Breakfast _____ Lunch _____ Dinner _____

Prepayment Requested: All checks will be sent to the site/department unless prior arrangements have been made (with AP) to pick up check

Requisition #	Dollar Amount
Registration Fee	_____
Hotel	_____
Airfare ****	_____
Car Rental ****	_____

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


School Name School of Engineering and Sciences Date 3/13 to/ 3/15 / 2020

Teacher's Name Kacie Go Room # C14 Telephone # 395-5040

Field Trip Destination Reno, Nevada


Reason for travel Kiwanis Club DCon Students will work on leadership skills, participate in a caucus, discuss community service opportunities and participate in college and career ready workshops


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 to Risk Management for review before signing. Attach a detailed itinerary for each day

Signed 
 Teacher

Approvals:

 1 / 31 / 20
 Principal Date

 2 / 12 / 20
 Risk Management Dept. Date

 2 / 18 / 20
 Segment Administrator Date

 2 / 28 / 20
 Superintendent Date

/ /
 Board Approval Date

Sacramento City Unified School District
**OVERNIGHT TRIPS
ACCOMMODATION INFORMATION**

NO PRIVATE HOMES, AIR BNB, HOSTELS

Facility Name Grand Sierra Resort Date Reserved 3 / 13 / 20

Address 2500 East 2nd Street City Reno, Nv zip 89595

Reservations Contact Person: Joi Cerveri

Telephone # 757-578-2128 Fax # _____

Total Rooms Reserved: 5 *chaperones get their own room*

Room #s: TBD

Reservation Dates: 3 / 13 / - 3 / 15 / 20

Signed _____

Kgo
Teacher

Approvals:

Principal

[Signature]
1 / 31 / 20

Date

Segment Administrator

[Signature]
2 / 18 / 20

Date