



SACRAMENTO CITY UNIFIED SCHOOL DISTRICT BOARD OF EDUCATION

Agenda Item# 11.1i

Meeting Date: May 19, 2022

Subject: Approve C.K. McClatchy High School Field Trip to Washington, D.C.
from May 27 to May 30, 2022

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

Division: Deputy Superintendent

Recommendation: Approve C.K. McClatchy High School Field Trip to Washington, D.C. May 27-30, 2022

Background/Rationale: From May 27-30, 2022, four students from C.K. McClatchy High School will be accompanied by two chaperones to Washington, D.C. to participate in the National Catholic Forensics League Debate Tournament.

Financial Considerations: No cost to the district. Expenses paid through the Sacramento Urban Debate League and the CKM Debate Boosters.

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: Jose A. Aguilar, Superintendent</p>
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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 CK McClatchy Date April 8, 2022
 Teacher's Name Stephen Goldberg Room # _____ Telephone #916-712-0782

Field Trip Destination Washington DC – Washington Convention Center

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 5/27/22 – Fly from Sacramento to San Francisco, then San Francisco to Washington – Dulles. Shuttle from Washington-Dulles to hotel. 5/30/22 – Shuttle from hotel to Washington – Dulles, fly from Washington – Dulles to Sacramento

Educational nature of field trip/excursion Debate tournament

Depart Date 5/27/22 Time 6:45 am Return Date 5/30/22 Time 8:34 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: _____

Funding Source Sacramento Urban Debate League and CK McClatchy Debate Boosters Financial Assistance Available? Yes No

Number of students participating: 4

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

	DRIVER		DRIVER
1) <u>Liz Fenton</u>	<input type="checkbox"/> yes <input checked="" 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

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

1) Stephen Goldberg yes no 2) _____ yes no
 3) _____ yes no 4) _____ yes no

Principal Approval _____ Date 4/29/22

Risk Management Approval (Unusual Activities) _____ Date 4/28/22

Instructional Assistant Superintendent Approval _____ Date 4.27.22

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 Instructional Assistant Superintendent for approval.
- Local Trip: (50-mile radius; driver led) — Submit driver led trips to Principal for approval then forward to Instructional Assistant Superintendent for approval 6 weeks prior to trip.
- Local Trip: (walking, RT, Amtrak): Submit walking trips to Principal for approval then forward to Instructional Assistant Superintendent for approval 2 weeks prior to trip.
- Out-of-Town: (beyond 50-mile radius) — Submit to Principal for approval then forward to Instructional Assistant Superintendent for approval 6 weeks prior to trip.
- Overnight Trip: Submit to Principal for approval then forward to Instructional Assistant Superintendent for approval 6 weeks prior to trip.
- Trip Involving Swimming or Wading: Submit to Principal for approval then forward to Instructional Assistant Superintendent for approval 6 weeks prior to trip.
- Trip Involving Unusual Activities (Water sports or high risk activities such as rafting, snorkeling, rock climbing, skiing, etc.) - Submit to Principal for approval then forward to Instructional Assistant Superintendent 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 Instructional Assistant Superintendent for approval 6 weeks prior to trip. Must have Superintendent, Board of Education and Risk Management approval prior to trip. Instructional Assistant Superintendent 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 Instructional Assistant Superintendent. Maintain a copy of all forms at site for 2 years

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

School Name: C.K. McClatchy High School _____ Date: 5/27/22-5/30-22
Teacher's Name: Stephen Goldberg _____ Room # _____ Telephone #: 916-712-0782
Field Trip Destination: Washington, D.C.

Reason For Travel: Qualified for National Catholic Forensics League 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 to Risk Management for review before signing. Attach a detailed itinerary for each day

Signed Stephen Goldberg
Teacher

Approvals: [Signature] 4, 8, 22
Principal Date

[Signature] 4, 28, 22
Risk Management Dept. Date

[Signature] 4, 27, 22
Segment Administrator Date

_____/_____/_____
Superintendent Date

_____/_____/_____
Board Approval Date

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Teacher

Approvals: [Signature] 4, 8, 22
Principal Date

[Signature] 4, 28, 22
Risk Management Dept. Date

[Signature] 4, 27, 22
Segment Administrator Date

[Signature] 5, 17, 22
Superintendent Date

Board Approval Date

TRAVEL REQUEST FORM (ACC-F014)

Sacramento City Unified School District

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.

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	REG: _____
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School/Department: C.H. McClatchy High School Date: 04/20/2022

Date(s) of Event: 05/27-30/2022 Location: Washington D.C.

Event Title (attach brochure): Debate Tournament

Purpose: Qualified for National Catholic Forensics League Debate Tournament

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

How does this travel align with the District's strategic plan? _____

How will this activity/event be used and shared? _____

Name of Attendee(s) (attach sheet for additional attendees)	Position	Substitute (Y/N)**	No. of Days Required	Budget Code for substitute
Stephen Goldberg	Coach	(No)	0	N/A
Elizabeth Fenton	Parent	(No)	0	N/A
		No		
		No		
		No		

Additional Attendees Attached: _____

****IF A SUBSTITUTE IS NEEDED, SEND A COPY OF THIS FORM TO PERSONNEL BQ 27 0**

Approvals:

Principal/Department Head Signature & Print Name: *Christine Baeta, CAO* Date: 4/20/22

Cabinet Level or Designee Signature: _____ Date: 5/4/22

Chief Business Officer Signature: _____ Date: 5/4/22

Superintendent or Designee Signature: _____ Date: _____

District cost for all attendees (estimate)

Registration Fee *** \$ 0

Meals included?

B L D

Lodging \$ 0

Transportation \$ 0

Meals \$ 0

Other \$ 0

TOTAL \$ 0

Categorical Budget Code(s): _____

General Fund/Unrestricted _____

***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 ****	_____