



SACRAMENTO CITY UNIFIED SCHOOL DISTRICT BOARD OF EDUCATION

Agenda Item# 13.1g

Meeting Date: March 7, 2024

Subject: Approve Albert Einstein field trip to Washington DC and New York City from March 20-25, 2024

- 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 Albert Einstein field trip to Washington DC and New York City from March 20-25, 2024

Background/Rationale: On March 20, 15 students, two teachers and six chaperones will travel via commercial airline to Washington DC. Students will arrive in NYC on March 23. Students will gain knowledge about US Government and history and visit historical landmarks.

Financial Considerations: There is no cost to the district. Expenses will be paid by parents.

LCAP Goal(s): College preparedness, increasing communication and critical thinking skills.

Documents Attached:

1. Out-of-state field trip documents

Estimated Time of Presentation: N/A

Submitted by: Mary Hardin Young, Interim Deputy Superintendent
Tuan Doung, Assistant Superintendent

Approved by: Lisa Allen, Interim Superintendent

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

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

School Name Albert Einstein Date 03/20/24
 Teacher's Name Anna Ruggiero Room # 67 Telephone # _____ Fax # _____
 Field Trip Destination Washington DC/newyork

- Walking Local-50 mile radius Out-of-Town (Beyond 50-mile radius) Overnight Out-of-State/Country
 Involving Swimming or Wading Unusual Activities

Route (must provide written directions our map) _____

Educational nature of field trip/excursion Curriculum enrichment

Depart Date 03/20/24 Time 6:30 am/pm Return Date 03/25/24 Time 10:30 am/pm

- TRANSPORTATION will be provided by: Walking School Bus - contact Transportation Field Trip Office Train
 Charter Bus Company (District Approved): Yes No (Check with Field Trip Office) Public Transportation
 Private Vehicle/Parent Driver/Faculty Driver - Complete Volunteer Personal Automobile Use Form for each vehicle and driver.
 Commercial Airline Other: _____

Number of students participating: 15 Funding Source self funded Financial Assistance Available? Yes No

Adult Chaperones:

(All clearances must be met prior to Field Trip Approval)

(Use a separate sheet if necessary)

	DRIVER						
1) <u>Mary Britain</u>	<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no	<input type="checkbox"/> Driver	<input checked="" type="checkbox"/> Fingerprint	<input checked="" type="checkbox"/> Mandated Reporter Training	<input checked="" type="checkbox"/> TB	
2) <u>Israel Lees</u>	<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no	<input type="checkbox"/> Driver	<input checked="" type="checkbox"/> Fingerprint	<input checked="" type="checkbox"/> Mandated Reporter Training	<input checked="" type="checkbox"/> TB	
3) <u>Phuongminh Tran</u>	<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no	<input type="checkbox"/> Driver	<input checked="" type="checkbox"/> Fingerprint	<input checked="" type="checkbox"/> Mandated Reporter Training	<input checked="" type="checkbox"/> TB	
4) <u>Angelic Warr</u>	<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no	<input type="checkbox"/> Driver	<input checked="" type="checkbox"/> Fingerprint	<input checked="" type="checkbox"/> Mandated Reporter Training	<input checked="" type="checkbox"/> TB	
5) <u>Levi Warr</u>	<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no	<input type="checkbox"/> Driver	<input checked="" type="checkbox"/> Fingerprint	<input checked="" type="checkbox"/> Mandated Reporter Training	<input checked="" type="checkbox"/> TB	
6) <u>Claudia Molina</u>	<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no	<input type="checkbox"/> Driver	<input checked="" type="checkbox"/> Fingerprint	<input checked="" type="checkbox"/> Mandated Reporter Training	<input checked="" type="checkbox"/> TB	
7) _____	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> Driver	<input type="checkbox"/> Fingerprint	<input type="checkbox"/> Mandated Reporter Training	<input type="checkbox"/> TB	
8) _____	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> Driver	<input type="checkbox"/> Fingerprint	<input type="checkbox"/> Mandated Reporter Training	<input type="checkbox"/> TB	

Teachers and Staff Attending (Use a separate sheet if necessary)

	DRIVER			DRIVER	
1) <u>Anna Ruggiero</u>	<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no	2) <u>Thomas McKern</u>	<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no
3) <u>I</u>	<input type="checkbox"/> yes	<input type="checkbox"/> no	4) _____	<input type="checkbox"/> yes	<input type="checkbox"/> no
5) _____	<input type="checkbox"/> yes	<input type="checkbox"/> no	6) _____	<input type="checkbox"/> yes	<input type="checkbox"/> no

Principal Approval [Signature] Date 2-22-24

Segment IAS/Department Head Approval [Signature] Date 2/23/24

Risk Management Approval (if applicable) [Signature] Date 2/20/24

Distribution: Refer to the Field Trip Information Form RSK-106F for the forms and distribution required for each trip. All field trips require a completed packet. Maintain all documents at site:

- Local Trip: (walking): Submit walking trips to Principal for approval two weeks prior to trip.
- Local Trip (school bus/charter bus/RTI/Amtrak): (50-mile radius) - Submit to Principal for approval two weeks prior to trip.
- Local Trip: (50-mile radius: driver) - Submit driver led trips to Principal for approval 6 weeks prior to trip.
- Out-of-Town: (beyond 50-mile radius) - Submit to Principal for approval then forward to Segment IAS/Department Head for approval 6 weeks prior to trip.
- Overnight Trip: Submit to Principal for approval then forward to Segment IAS/Department Head for approval 6 weeks prior to trip.
- Trip Involving Swimming or Wading: Submit to Principal for approval then forward to Segment IAS/Department Head 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 Segment IAS/Department Head/Risk Management 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 IAS/Department Head for approval 6 weeks prior to trip. Must have Superintendent, Board of Education and Risk Management approval prior to trip. Segment IAS office will place field trip item on Board Agenda for final approval.
- Approved forms will be returned by Segment IAS/Department Head's Office. Maintain a copy of all forms at site for 2 years.
- Venue/Destination: Must comply with SCUSD COVID19 mitigation guidelines for all trips outside of district facilities.

Reviewed by Site Office Manager: _____
 (Initials)

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

School Name Albert Einstein MS Date 2 / 22 / 24
Teacher's Name Anna Ruggiero Room # 67 Telephone # 395-5310
Field Trip Destination Washington DC and New York
Reason for travel Curriculum enrichment

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:

 2/22/2024
Principal Date

 2/20/24
Risk Management Dept. Date

 2/23/24
Segment Administrator Date

 2/27/24
Superintendent Date

/ /
Board Approval Date

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 checked="" 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 #: None
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School/Department: Albert Einstein Middle School Date: 2-22-24

Date(s) of Event: 3/20/24-3/25/24 Location: Washington DC and New York Trip

Event Title (attach brochure): Student Trip to Washington DC and New York

Purpose*: Curriculum Enrichment

*(what value does this activity give students, attendees, staff, department/site or community?)
College and Career Ready Students

How does this travel align with the District's strategic plan?
Student will be able to discuss with peers upon their return

How will this activity/event be used and shared?
Student will be able to discuss with peers upon their return

Name of Attendee(s) (attach sheet for additional attendees)	Position	Substitute (Y/N)**	No. of Days Required	Budget Code (for substitute)
Anna Ruggiero	Teacher	Yes	3	<u>01-0000-0-1103-17-1110-1000-700-000</u>
Tom McKenna	Teacher	Yes	3	<u>01-0000-0-1103-17-1110-1000-700-000</u>
		No		
		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>[Signature] Chase Tafaya</u> Date: <u>2-22-24</u> Cabinet Level or Designee Signature: <u>[Signature]</u> Date: <u>02/26/24</u> Chief Business Officer Signature: <u>[Signature]</u> Date: <u>2/23/24</u> Superintendent or Designee Signature: _____ Date: _____	District cost for all attendees (estimate) Registration Fee *** <u>0</u> Meals included? <input checked="" type="checkbox"/> Yes B <input type="checkbox"/> L <input type="checkbox"/> D <input type="checkbox"/> Lodging <u>0</u> Transportation <u>0</u> Meals <u>0</u> Other <u>0</u> TOTAL <u>0</u>
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Categorical Budget Code(s): NO expense to district, parent funded \$ _____
 General Fund/Unrestricted Field Trip \$ _____

***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 ****	_____