



# SACRAMENTO CITY UNIFIED SCHOOL DISTRICT BOARD OF EDUCATION

Agenda Item# 8.1e

**Meeting Date:** October 2, 2014

**Subject:** Alice Birney Field Trip to Ashland, Oregon, October 21 - 24, 2014

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

**Division:** Chief of Schools

**Recommendation:** Approve Alice Birney Field Trip to Ashland, Oregon, October 21 – 24, 2014

**Background/Rationale:** October 21 – 24, 2014 29 Alice Birney students, 1 teacher chaperone, and 7 parent chaperones will travel by private vehicle to Ashland, Oregon to attend the Shakespeare Festival. Students will attend theater workshops and plays to compliment study of Shakespeare and Renaissance Literature.

**Financial Considerations:** No cost to the district. Expenses paid through parent contribution and fundraising.

**Documents Attached:** Out of State Field Trip Documents

<p><b>Estimated Time of Presentation:</b> N/A</p> <p><b>Submitted by:</b> Lisa Allen, Chief of Schools Mary Hardin Young, Area Assistant Superintendent</p> <p><b>Approved by:</b> José L. Banda, Superintendent</p>
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**Sacramento City Unified School District**  
**OUT-OF-STATE OR OUT-OF-COUNTRY**  
**TRAVEL REQUEST**

School Name ALICE BIRNEY Date 9/4/14


Teacher's Name SUSAN DAVIS (BALLADARES) Room # 23 Telephone # 433-5544

Field Trip Destination ASHLAND OREGON SHAKESPEARE FESTIVAL

Reason for travel STUDENTS WILL ATTEND THEATER WORKSHOPS AND PLAYS TO COMPLEMENT OUR  
study of Shakespeare and Renaissance Literature


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: SEE ATTACHMENT


Signed SUSAN DAVIS   
 Teacher

**Approvals:**

 9-6-14  
 Principal Date

 9/11/14  
 Risk Management Dept. Date

 9/10/14  
 Segment Administrator Date

 9/15/14  
 Superintendent Date

Board Approval Date

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

Parent Permission Form required for each student field trip, See reference distribution section for details concerning each type of trip.  
School Name Alice Birney Waldorf-Inspired EK-8 Date September 4, 2014

Teacher's Name Susan Davis Room # 23 Telephone # 433-5544  
Fax # 433-5589

Field Trip Destination Ashland, OR Shakespeare Festival

Local (50 mile radius)  Out-of-Town (Beyond 50 mile radius)  Overnight

Out-of-State/Country  Involving Swimming or Wading  Unusual Activities  
Route I-5 to Ashland, OR

Educational nature of field trip/excursion Students will attend Theater Workshops and Plays to compliment our study of Shakespeare and Renaissance Literature

Depart Date 10/21/14 Time 7:30 am am/pm Return Date 10/24/14 Time 9:30 am 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  Train  Commercial Airline  Other: \_\_\_\_\_

Funding Source Class Funds Financial Assistance Available?  yes  no

Number of students participating: 29

Adult Supervisors/ Drivers: DRIVER DRIVER  
1) Mark Cashatt 5) Andrea Kincaid  yes  no 2) Justine Belson 6) Elisa Miller  yes  no  
3) Terrie Gross 7) Erika Teach  yes  no 4) Valerie Scott  yes  no

Teachers and Staff Attending:  
1) Susan Davis  yes  no 2) \_\_\_\_\_  yes  no  
3) \_\_\_\_\_  yes  no 4) \_\_\_\_\_  yes  no

Principal Approval [Signature] Date 9-6-14

Risk Management Approval (Unusual Activities) [Signature] Date 9/11/14

Segment Administrator Approval [Signature] Date 9/10/14

- Distribution: Refer to Field Trip Information Form RSK 106F for the forms and distribution required for each trip:
1. **Local Trip:** (50 mile radius) - Submit to Principal for approval. Maintain all documents at site.
  2. **Out-Of-Town:** (beyond 50 mile radius) - Submit to Principal for approval then forward to Segment Administrator 10 days prior to trip.
  3. **Overnight Trip:** Submit to Principal for approval then forward to Segment Administrator 10 days prior to trip.
  4. **Trip Involving Swimming or Wading:** Submit to Principal for approval then forward to Segment Administrator 10 days prior to trip.
  5. **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 Administrator and Risk Management 6 weeks prior to trip. Must purchase Special Event Liability Insurance.
  6. **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 automatically rejected by the Board.

*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

<b>Request to Attend:</b> <input type="checkbox"/> Conference/Workshop <input checked="" type="checkbox"/> <b>Class Field Trip</b> <input type="checkbox"/> Business Meeting <small>-out of State</small>	<b>Purpose for Attending:</b> <input type="checkbox"/> Professional Development <input type="checkbox"/> Continued Education Credits Earned	<b>Instructions:</b> 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: Alice Birney Waldorf-Inspired eK School Date: Sep 8, 2014

Date(s) of Event: 10/21/14-10/24/14 Location: Ashland, OR;

Event Title (attach brochure): Class Field Trip to Shakespeare Festival in Ashland, OR

Purpose\*: Students will attend Theater Workshops and Plays to compliment our study of Shakespeare and Renaissance Literature.

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

How does this travel align with the District's strategic plan? Students will attend Theater Workshops and Plays to compliment our study of Shakespeare and Renaissance Literature.

How will this activity/event be used and shared? Students will attend Theater Workshops and Plays to compliment our study of Shakespeare and Renaissance Literature.

Name of Attendee(s) <small>(attach sheet for additional attendees)</small>	Position	Substitute (Y/N)**	No. of Days Required	Budget Code (for substitute)
Susan Davis	Classroom Teacher, 8th grade	No	4	
		No		
		No		
		No		
		No		

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

<b>Approvals:</b> <div style="margin-bottom: 10px;">                  Principal/Department Head Signature &amp; Print Name _____ Date <u>9-8-14</u> </div> <div style="margin-bottom: 10px;">                  Cabinet Level or Designee Signature _____ Date <u>9/10/14</u> </div> <div style="margin-bottom: 10px;">                  Chief Business Officer Signature _____ Date <u>9/11/14</u> </div> <div style="margin-bottom: 10px;">                  Superintendent or Designee Signature _____ Date <u>9/15/14</u> </div>	District cost for all attendees (estimate) Registration Fee *** <span style="float: right; border: 1px solid black; padding: 2px;">0.00</span> Meals included? <input type="checkbox"/> B <input type="checkbox"/> L <input type="checkbox"/> D Lodging _____ Transportation _____ Meals _____ Other _____ <b>TOTAL</b> <span style="float: right; border: 1px solid black; padding: 2px;">\$ 0.00</span>
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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 ****	_____	_____