



SACRAMENTO CITY UNIFIED SCHOOL DISTRICT BOARD OF EDUCATION

Agenda Item 9.1i

Meeting Date: January 17, 2019

Subject: Approve Sacramento New Technology High School Field Trip to Las Vegas, Nevada February 1-4, 2019

- 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 Sacramento New Technology High School Field Trip to Las Vegas, NV from February 1, 2019 to February 4, 2019.

Background/Rationale: On February 1, 2019 a group of four students, two parent chaperones, and one adult chaperone from Sacramento New Technology High School will travel via private vehicle to Las Vegas, NV to participate in a debate tournament at UNLV in Las Vegas, NV.

Financial Considerations: No cost to the district.

LCAP Goal(s): College and Career Ready Students

Documents Attached:

1. Out of State Field Trip Documents

Estimated Time of Presentation: N/A

Submitted by: Dr. Iris Taylor, Chief Academic Officer
Chad Sweitzer, Instructional Assistant
Superintendent

Approved by: Jorge A. Aguilar, 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 field trip. See below reference distribution section for details concerning each type of trip.

School Name Sacramento New Technology High School Date 2/1/19, 2/2/19, 2/3/19, 2/4/19

Teacher's Name Zac Jereb Room # 2 Telephone # 916-521-8668
 Fax # _____

Field Trip Destination UNVL 4505 S Maryland Pkwy, Las Vegas, NV 89154

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 attached. Highway 99 S, CA 58E and I-15 N.

Educational nature of field trip/excursion Debate Tournament

Depart Date 2 / 1 / 19 Time 10 am/pm Return Date 2 / 4 / 19 Time 6 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: _____

Funding Source Sacramento Urban Debate League Financial Assistance Available? Yes No

Number of students participating: 4

Adult Chaperones/Drivers:	DRIVER		DRIVER
1) <u>Michelle Cromeenes</u>	<input type="checkbox"/> yes <input type="checkbox"/> no	2) _____	<input type="checkbox"/> yes <input type="checkbox"/> no
3) <u>Patricia Galan</u>	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	4) _____	<input type="checkbox"/> yes <input type="checkbox"/> no

Teachers and Staff Attending:

1) <u>Stephen Goldberg</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

Principal Approval [Signature] Date 12/17/18

Risk Management Approval (Unusual Activities) [Signature] Date 12/21/18

Segment Administrator Approval [Signature] Date 12/11/18


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

1. 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.
2. Local Trip: (50-mile radius: driver led, walking trip) - Submit driver led trips to Principal for approval then forward to Segment Administrator for approval 6 weeks prior to trip. Submit walking trips to Principal for approval then forward to Segment Administrator for approval 2 weeks prior to trip.
3. Out-of-Town: (beyond 50-mile radius) - Submit to Principal for approval then forward to Segment Administrator for approval 6 weeks prior to trip.
4. Overnight Trip: Submit to Principal for approval then forward to Segment Administrator for approval 6 weeks prior to trip.
5. Trip Involving Swimming or Wading: Submit to Principal for approval then forward to Segment Administrator for approval 6 weeks prior to trip.
6. 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 for approval 6 weeks prior to trip. This may require Special Event Liability Insurance.
7. 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.
8. Approved forms will be returned by Segment Administrator. 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 Sacramento New Technology High School Date 12 / 3 / 18
Teacher's Name Zac Jereb Room # 2 Telephone # 916-521-8668
Field Trip Destination University of Nevada, Las Vegas 4505 S Maryland Pkwy, Las Vegas, NV 89154
Reason for travel 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 
Teacher

Approvals:

 12 / 7 / 18
Principal Date

 12 / 12 / 18
Risk Management Dept. Date

 12 / 11 / 18
Segment Administrator Date

 12 / 19 / 18
Superintendent Date

/ /
Board Approval Date

No Cost to the district

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
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REQ # _____

School/Department Sacramento New Technology High School Date Dec 3, 2018

Date(s) of Event 02/01/19-02/04/19 Location UNLV 4505 S Maryland Pkwy, Las Vegas NV 89154

Event Title (attach brochure) Debate Tournament

Purpose* Debating

*(what value does this activity give students, attendees, staff, department/site 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)
Goldberg, Stephen	Teacher	No		
		No		
		No		
		No		
		No		

Additional Attendees Attached

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

Approvals:

Principal/Department Head Signature & Print Name _____ Date 12/10/18

Cabinet Level or Designee Signature _____ Date 12/11/18

Chief Business Officer Signature _____ Date 12-18-18

Superintendent or Designee Signature _____ Date 12/29/18

District cost for all attendees (estimate)

Registration Fee *** 0

Meals included?

B L D

Lodging _____

Transportation _____

Meals _____

Other _____

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 ****	_____	_____