

SACRAMENTO CITY UNIFIED SCHOOL DISTRICT **BOARD OF EDUCATION**

Agenda Item# 11.1c

Meering Date	Meeting Dat	е	:
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Meeting Date:
Subject: Rosemont High School Field Trip to El Yunque National Park, Luquillo, Puerto Rico April 17 to 22, 2011
☐ Information Item Only ☐ Approval on Consent Agenda ☐ Conference (for discussion only) ☐ Conference/First Reading (Action Anticipated:) ☐ Conference/Action ☐ Action ☐ Public Hearing
Learning Support Unit/Department: Accountability Office, East – Area 3 Schools
Recommendation: Approve Rosemont High School field trip to Luquillo, Puerto Rico April 17 – 22, 2011.
Background/Rationale : April 17 – 22, 2011 4 students will accompany Rosemont High School teacher Robyn Le on a trip via commercial airline to volunteer with the Sierra Club in E Yunque National Park on Environmental Conservation Clean Up. They will be involved in a 7 day international volunteerism, cross cultural and environmental study abroad program. In Puerto Rico students will volunteer with the Sierra Club.
Financial Considerations: Club Fundraising and Student Pay

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Documents Attached:

Field Trip Request Form Out-of-State Travel Request Travel Request

Estimated Time of Presentation: NA

Submitted by: Greg Purcell, Area Assistant Superintendent Approved by: Mary C. Shelton, Chief Accountability Officer

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 ROSEMONT HIGH SCHOOL Date 2-3-2011 _____Room #_C119 Telephone #228-5844 Teacher's Name ROBYN LE Fax # 228-5733 Field Trip Destination LUQUILLO, PUERTO RICO ☐ Local (50 mile radius) ☑ Out-of-Town (Beyond 50 mile radius) ☑ Overnight Out-of-State/Country Involving Swimming or Wading Involving Swimming Inv Route Educational nature of field trip/excursion ENVIORNMENTAL CONSERVATION Return Date^{4/22/11} Time am/pm Depart Date^{4/17/11} Time_6:00 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 CLUB FUNDRAISING/STUDENT Financial Assistance Available? yes one **FOUR** Number of students participating: DRIVER DRIVER Adult Supervisors/ Drivers: ● yes □ no 2) _____ □ yes □ 1) ROYBN LE Teachers and Staff Attending: 1) ROBYN LE yes Principal Approval ___ Risk Management Approval (Unusual Activities) **Segment Administrator Approval** Distribution: Refer to Field Trip Information Form RSK 106F for the forms and distribution required for each trip: Local Trip: (50 mile radius) - Submit to Principal for approval. Maintain all documents at site. 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. Trip Involving Swimming or Wading: Submit to Principal for approval then forward to Segment Administrator 10 days 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 Administrator and Risk Management 6 weeks prior to trip. Must purchase Special Event Liability Insurance. 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.

Print Form

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

School Name Date Date
Teacher's Name ROYBN LE Room # C119 Telephone #228-5844
Field Trip Destination LUQUILLO, PUERTO RICO
Reason for travel VOLUNTEER WITH THE SIERRA CLUB IN THE EL YUNQUE NATIONAL PARK
ON ENVIRONMENTAL CONSERVATION CLEAN-UP
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.
KAYAKING HIKING
Attach a detailed itinerary for each day: SEE ATTACHED
Signed Teacher
Approvals: Principal Date Date Risk Management Pept. Date
Segment Administrator Date
Superintendent Date
Board Approval Date

Print Form

TRAVEL REQUEST FORM (ACC-F014)

Sacramento City Unified School District

Request to Attend:	Purpo	ose for Attending:		completed a	s: This form must be and received in Accounts
Conference/Workshop	Professional Development				east 30 days prior to the ip- 60 days if out-of-state.
Business Meeting	Contin	ued Education Credits Earne	REQ #N/A		
School/Department ROSEMONT H	IGH SCHOOL				Date Feb 2, 2011
Date(s) of Event APRIL 17-22, 201	1	Location LUQUIL	LO, PUERTO	RICO	
Event Title (attach brochure)					
Purpose* VOLUNTEERISM, ENVIRO	ONMENTAL STUD	DIES, CONSERVATION, ECOLOGY	<i>'</i>		
*(what value does this activity give stu					
What Board goal/priority does this		* <u></u>	IROPY, CULT	URAL IMMERSIO	N, ENVIRONMENTAL
How will this activity/event be u Name of Attendee(s)	used and share	d? Position		No. of Days	Budget Code
(attach sheet for additional atter	ndees)	Position	Substitute (Y/N)* *	Required	(for substitute)
ROBYN LE		TEACHER/CLUB ADVISOR	No		
			No		
			No	-	ne 300 ft q 11 to 000 e 1 (11 to
			No		15°.° 1 A / 3 A / 1 1
**IF A SUBSTITUTE IS NEEDED, S	SEND A COPY OF	F THIS FORM TO PERSONNEL,			ditional Attendees Attached
Approvals/ \(\)		2/8/	И	Registration Fee	
Principal Department Head	,	Date	_	Meals include B — L	
Dollid		<u> 2.75</u>	· //_	Lodging	I I. 0.00
Associate Superintendent/Assistan	it Supenntendent	Date		Transportation	0.00
Deputy Superintendent/CFO (Finar	nce)	Date	-{	Meals	0.00
Superintendent or Designee		Date		Other	0.00
Categorical	Budget Code(s)): No DISTRICT FUNDANCE		TOTAL	\$ 0.00
General Fund/Unrestricted		NO DISTRICT FUNDING	NEEDED	<u></u>	\$
					\$
***If any meals are included in the				Lunch	Dinner
Prepayment Requested: All check	ks will be sent to		arrangements		rith AP) to pick up check
B		Requisition #		Dollar Amount	
Registration Fee	-		<u></u>		
Hotel Airfare ****	_				
Car Rental ****	-				
**** If airfare or car rental is reques	ted, send a copy	of this form to Purchasing, Box	830		
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