



SACRAMENTO CITY UNIFIED SCHOOL DISTRICT BOARD OF EDUCATION

Agenda Item# 9.1d

Meeting Date:

Subject: West Campus High School Field Trip to Shakespeare Festival
Ashland, Oregon April 4 – 6, 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, Central – Area 2 Schools

Recommendation: Approve West Campus High School field trip to Ashland, Oregon April 4 – 6, 2011.

Background/Rationale: From April 4th to April 6th, 2011 a group of 10 students and 2 staff from West Campus High School will travel via rented SUVs to Ashland, Oregon to see three plays at the Shakespeare Festival. This experience will allow students to experience acclaimed literature performed professionally, allowing students to study and enjoy **The Imaginary Invalid**, **To Kill a Mockingbird**, and **Measure for Measure**. Additionally, students will attend a college tour/staff presentation and attend two prologue discussions.

Rented SUVs will provide the transportation for the 10 students, 1 teacher chaperone, and one classified chaperone. The students will be accompanied by chaperones to all plays, prologues, university's presentation, and all parties will depart from West Campus High School on Monday, April 4, 2011 at 3:45 p.m. and return to West Campus High School on Wednesday, April 6, 2011 at approximately 10:30 p.m. Emergency information will accompany the students in the SUVs. The students and chaperones will stay at Southern Oregon University dorms.

Financial Considerations: The cost to the students is \$245 which includes boarding for two nights, tickets for three plays, transportation, some meals, and the prologue fee. West Campus has offered fundraisers where full profit from the sales would be applied to student cost.

Documents Attached:

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

Estimated Time of Presentation: NA

Submitted by: Mary Hardin Young, 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 West Cmpus High School Date 2/14/11

Teacher's Name Shawna Placido Bell Room # 16 Telephone #9162776400
 Fax # 916-277-6593

Field Trip Destination Oregon Shakespeare Festival in Ashland, OR

Local (50 mile radius) Out-of-Town (Beyond 50 mile radius) Overnight
 Out-of-State/Country Involving Swimming or Wading Unusual Activities
 Route 58th S, Fruitridge W, Hwy 99 E to 50 Interchange W, I-5 North to Ashland, OR

Educational nature of field trip/excursion View professional productions of classic plays conducted by a prof. acting co. and expose students to the university exp.

Depart Date 4/4/11 Time 3:45 am/pm Return Date 4/6/11 Time 10:30 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: Rented SUVs

Funding Source Students Financial Assistance Available? yes no

Number of students participating: 10

Adult Supervisors/ Drivers:	DRIVER	DRIVER
1) _____	<input type="checkbox"/> yes <input 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:

1) <u>Debra Durazo</u>	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	2) <u>Shawna Placido Bell</u>	<input checked="" 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 2/18/11
 Risk Management Approval (Unusual Activities) [Signature] Date 2/18/11
 Segment Administrator Approval [Signature] Date 2/18/11

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.
- 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.

Maintain a copy of all forms at site for 2 years. Approved forms will be returned by Segment Administrator

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

School Name West Campus High School Date 2/14/11

Teacher's Name Shawna Placido Bell Room # 16 Telephone # 916-277-6400

Field Trip Destination Oregon Shakespeare Festival - Ashland, OR

Reason for travel Attend the Shakespearean Festival in Ashland, OR to view three plays and two prologues. It is also to expose students to the college experience by staying in the dormitories at Southern Oregon University. We will have a presentation by college staff and eat in the cafeteria.

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:

Signed Shawna Placido Bell
Teacher

Approvals:
[Signature] 2/18/11
 Principal Date

[Signature] 2/18/11
 Risk Management Dept. Date

[Signature] 2/18/11
 Segment Administrator Date

 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 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 # _____
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School/Department West Campus High School Date Feb 18, 2011

Date(s) of Event 4/4/11 - 4/6/11 Location Ashland, OR

Event Title (attach brochure) Oregon Shakespeare Festival

Purpose* Field trip to the Oregon Shakespeare Festival to view three professionally produced plays and participate in two prologues and a college tour/staff presentation.

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

What Board goal/priority does this travel support? _____

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)
Shawna Placido Bell	Teacher	Yes	2	01-0000-0-1102-10-1110-1000-151-0521-000
Debra Durazo	Clerk	No		
		No		
		No		

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

Approvals: <div style="margin-bottom: 10px;"> _____ Principal/Department Head Date <u>2/18/11</u> </div> <div style="margin-bottom: 10px;"> _____ Associate Superintendent/Assistant Superintendent Date <u>2/18/11</u> </div> <div style="margin-bottom: 10px;"> _____ Deputy Superintendent/CFO (Finance) Date <u>2/22/11</u> </div> <div style="margin-bottom: 10px;"> _____ Superintendent or Designee Date _____ </div>	District cost for all attendees (estimate) Registration Fee *** 0.00 Meals included? B <input type="checkbox"/> L <input type="checkbox"/> D <input type="checkbox"/> Lodging 0.00 Transportation 0.00 Meals 0.00 Other 0.00 TOTAL \$ 0.00
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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 ****	_____