



SACRAMENTO CITY UNIFIED SCHOOL DISTRICT BOARD OF EDUCATION

Agenda Item 10.1g

Meeting Date: February 21, 2019

Subject: Approve School of Engineering and Sciences Field Trip to Salt Lake City, Utah March 26-31, 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 School of Engineering and Sciences Field Trip to Salt Lake City, Utah from 3-26-19 to 3-31-19.

Background/Rationale: On March 26, 2019 a group of 28 students, three teacher/staff chaperones and 3 parent chaperones from School of Engineering and Sciences will travel via charter bus to the FIRST Robotics Competition in Salt Lake City, Utah. This will give students the opportunity to demonstrate their skill proficiency and collaborate with peers.

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:

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 School of Engineering and Sciences Date 12 / 12 / 2018
 Teacher's Name Ken Davis Room # B5 Telephone # 395-5040
 Fax # _____

Field Trip Destination Salt Lake City, Utah

- 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 I-5 North to 80 E to Salt Lake

Educational nature of field trip/excursion FIRST Robotics Competition College and Career Readiness

Depart Date 3 / 26 / 19 Time 5:30 am am/pm Return Date 3 / 31 / 19 Time 6:00 pm 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 _____ Financial Assistance Available? Yes No

Number of students participating: 28

Adult Chaperones/Drivers:	DRIVER	DRIVER
1) _____	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	2) <u>Aaron Pecho</u> <input type="checkbox"/> yes <input checked="" type="checkbox"/> no
3) <u>Chris Merica</u>	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	4) <u>Berta Serrato</u> <input type="checkbox"/> yes <input checked="" type="checkbox"/> no

Teachers and Staff Attending:

1) <u>Ken Davis</u>	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	2) <u>Mari Edwards</u>	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
3) <u>Julio Olivares</u>	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	4) _____	<input type="checkbox"/> yes <input type="checkbox"/> no

Principal Approval [Signature] Date 12/12/18

Risk Management Approval (Unusual Activities) [Signature] Date 1/22/19

Segment Administrator Approval [Signature] Date 1/11/19

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

- 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.
- 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.
- Out-of-Town: (beyond 50-mile radius) - Submit to Principal for approval then forward to Segment Administrator for approval 6 weeks prior to trip.
- Overnight Trip: Submit to Principal for approval then forward to Segment Administrator for approval 6 weeks prior to trip.
- Trip Involving Swimming or Wading: Submit to Principal for approval then forward to Segment Administrator 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 Administrator 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 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.
- 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 School of Engineering and Sciences Date 1 / 10 / 19
Teacher's Name Ken Davis Room # B05 Telephone # 395-5040
Field Trip Destination Salt Lake City Utah
Reason for travel FIRST Robotics Utah Regional Competition

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 [Signature]
Teacher

Approvals:
[Signature] 1/11/19
Principal Date

[Signature] 1/11/19
Risk Management Dept. Date

[Signature] 1/11/19
Segment Administrator Date

[Signature] 2/7/19
Superintendent Date

/ /
Board Approval Date

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 School of Engineering and Sciences Date 1/7/2019

Date(s) of Event 3/26 - 3/31/2019 Location Salt Lake City, Utah

Event Title (attach brochure) FIRST Robotics Utah Regional Competition

Purpose* Robotics Competition

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

How does this travel align with the District's strategic plan? College and Career Readiness

How will this activity/event be used and shared? Shared with staff and students

Name of Attendee(s) <small>(attach sheet for additional attendees)</small>	Position	Substitute (Y/N)**	No. of Days Required	Budget Code <small>(for substitute)</small>
Ken Davis	Teacher	Yes	5	01-3550-0-1102-15-3807-1000-106-0732-000
Mari Edwards	Teacher	No		Using personal time
Julio Olivares	Teacher	No		Using personal time
Aaron Pecho	District Employee	No		
		No		

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

Approvals:

[Signature] 1/10/19
Principal/Department Head Signature & Print Name Date

[Signature] 1/11/19
Cabinet Level or Designee Signature Date

[Signature] 1-29-19
Chief Business Officer Signature Date

[Signature] 2/4/19
Superintendent or Designee Signature Date

District cost for all attendees (estimate)

Registration Fee *** 0.00

Meals included? B L D

Lodging 0.00

Transportation 0.00

Meals 0.00

Other _____

TOTAL \$ 0.00

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 ****	_____