

REQUEST FOR TRIP APPROVAL

☒ DAY TRIP OUTSIDE LOS ANGELES, VENTURA, ORANGE AND RIVERSIDE COUNTIES (East of I-215)☒ OVERNIGHT / OUT-OF-STATE TRIPS

REQUESTS SHALL BE SUBMITTED IN WRITING 30 DAYS PRIOR TO THE TRIP DATE (DAY TRIPS) AND SUBMITTED 45 DAYS IN ADVANCE OF OUT-OF-STATE TRIPS / OVERNIGHT TRIPS (REGARDLESS OF DESTINATION) AND SHALL INCLUDE THE NAMES OF ALL DISTRICT-APPROVED SUPERVISORS. TRIP APPROVAL REQUESTS THAT ARE INCOMPLETE OR ARE SUBMITTED AFTER THE DEADLINE FOR SUBMISSION WILL BE DENIED, WITH THE EXCEPTION OF CIF PLAYOFF COMPETITION. ANY CHANGES TO THE INFORMATION PROVIDED ON THIS REQUEST FOR TRIP APPROVAL MADE AFTER THE FORM IS SUBMITTED MUST BE SENT IN A WRITTEN MEMORANDUM TO THE SUPERINTENDENT'S OFFICE PRIOR TO THE TRIP.

DATE OF REQUEST: 9/1/16 SCHOOL: Canyon High
 GROUP: Girls Basketball ADVISOR/COACH: Jessica Haayer
 TRIP DAYS/DATES: 12/18 - 12/22/16 DEPARTURE TIME: 6am RETURN TIME: 9pm
 DESTINATION: Phoenix Arizona
 METHOD OF TRANSPORTATION: Cleared drivers & parents driving own student

*IF METHOD OF TRANSPORTATION IS BY BUS, CHECK THE FOLLOWING: () SCHOOL BUS - LEVEL(S) _____ () CHARTER BUS - LEVEL(S) _____

Transportation for day trips outside Los Angeles, Ventura, Orange, Riverside (east of I-215) Counties may not be made by private or rental vehicles. All School Bus, Charter and SPAB Transportation for any trip inside the State of California must be made through the District Transportation Department. Groups traveling out of state shall ensure that utilized transportation meets the legal requirements for the transportation of pupils outside of California. All charter bus reservations must be paid for by the group and will not be funded by the District, with the exception of CIF semi-finals, where the school will pay any costs above the funding for a regular school bus. The District will pay the full cost of charter buses for CIF Finals contests.

PURPOSE OR JUSTIFICATION FOR TRIP: Nike Tournament of Champions
 HOW MANY DAYS/PERIODS WILL STUDENTS BE ABSENT? 0 DAYS OR _____ PERIODS
 ACCOMMODATIONS (Include complete address): AZ Grand Resort & Spa, 8000 S. Arizona Pkwy, Phoenix AZ 85044
 NUMBER OF SUBSTITUTE TEACHERS REQUIRED: N/A substitute(s) for _____ DAYS OR _____ PERIODS
 FUNDING SOURCE FOR SUBSTITUTE TEACHERS: N/A

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

☒ TRANSPORTATION: _____
☒ LODGING & OTHER: Basketball program

NUMBER OF STUDENTS PARTICIPATING: Male: 0 Female: 14 Total: 14

CERTIFICATED GROUP LEADER: Jessica Haayer CELL PHONE: _____

A minimum of two supervisors is required per bus. For overnight and out-of-state trips, a ratio of 1 supervisor per 12 students is required. Where the student group is co-ed, both male and female supervisors shall accompany the group. (Indicate supervisors' status: asterisk (*) for certificated employees; plus sign (+) for classified or other employee of the District, and number sign (#) for persons that will transport students).

NAME(S) OF MALE SUPERVISORS: Paul Broneer + #

NAME(S) OF FEMALE SUPERVISORS: Jessica Haayer * #, Nia Martinez +

Site Administrators shall consider adherence to Board Policies relative to transportation, supervisors, the impact of student absences from class, and the need for substitutes when approving a trip. Expenses for trips must be borne by the school or group taking the trip, with the exception of CIF playoff competition or league affiliated trips.

Site administrator verification that supervisors have been cleared: A Kayne Date: 9/2/16
 Principal: [Signature] Date: 9/2/16
 Superintendent: [Signature] Date: 9/13/16
 Governing Board (if required): _____ Date: _____

Revised 3/2013

REQUEST FOR TRIP APPROVAL

002797

() DAY TRIP OUTSIDE LOS ANGELES, VENTURA, ORANGE AND RIVERSIDE COUNTIES (East of I-215)
() OVERNIGHT / OUT-OF-STATE TRIPS

REQUESTS SHALL BE SUBMITTED IN WRITING 30 DAYS PRIOR TO THE TRIP DATE (DAY TRIPS) AND SUBMITTED 45 DAYS IN ADVANCE OF OUT-OF-STATE TRIPS / OVERNIGHT TRIPS (REGARDLESS OF DESTINATION) AND SHALL INCLUDE THE NAMES OF ALL DISTRICT-APPROVED SUPERVISORS. TRIP APPROVAL REQUESTS THAT ARE INCOMPLETE OR ARE SUBMITTED AFTER THE DEADLINE FOR SUBMISSION WILL BE DENIED, WITH THE EXCEPTION OF CIF PLAYOFF COMPETITION. ANY CHANGES TO THE INFORMATION PROVIDED ON THIS REQUEST FOR TRIP APPROVAL MADE AFTER THE FORM IS SUBMITTED MUST BE SENT IN A WRITTEN MEMORANDUM TO THE SUPERINTENDENT'S OFFICE PRIOR TO THE TRIP.

DATE OF REQUEST: 9/3/16 SCHOOL: NART
GROUP: Cross Country Boys ADVISOR/COACH: L. David
TRIP DAYS/DATES: 10/7 - 10/8/16 DEPARTURE TIME: 1:00pm RETURN TIME: 7:00pm
DESTINATION: Clovis - Woodward Park
METHOD OF TRANSPORTATION: Autos with District approved drivers / Parents driving own students
*IF METHOD OF TRANSPORTATION IS BY BUS, CHECK THE FOLLOWING: () SCHOOL BUS - LEVEL(S) _____ () CHARTER BUS - LEVEL(S) _____

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PURPOSE OR JUSTIFICATION FOR TRIP: Invitational
HOW MANY DAYS/PERIODS WILL STUDENTS BE ABSENT? 0 DAYS OR 1 PERIODS Class, CA
ACCOMMODATIONS (Include complete address): Fairfield Inn 50 N. Davis Ave, 93612
NUMBER OF SUBSTITUTE TEACHERS REQUIRED: 0 substitute(s) for _____ DAYS OR _____ PERIODS
FUNDING SOURCE FOR SUBSTITUTE TEACHERS: N/A

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

() TRANSPORTATION: Fundraising
() LODGING & OTHER: Fundraising

NUMBER OF STUDENTS PARTICIPATING: Male: 7 Female: _____ Total: 7

CERTIFICATED GROUP LEADER: Lamy David CELL PHONE _____

A minimum of two supervisors is required per bus. For overnight and out-of-state trips, a ratio of 1 supervisor per 12 students is required. Where the student group is co-ed, both male and female supervisors shall accompany the group. (Indicate supervisors' status: asterisk (*) for certificated employees; plus sign (+) for classified or other employee of the District, and number sign (#) for persons that will transport students).

NAME(S) OF MALE SUPERVISORS: *Darren James #

NAME(S) OF FEMALE SUPERVISORS: _____

Site Administrators shall consider adherence to Board Policies relative to transportation, supervisors, the impact of student absences from class, and the need for substitutes when approving a trip. Expenses for trips must be borne by the school or group taking the trip, with the exception of CIF playoff competition or league affiliated trips.

Site administrator verification that supervisors have been cleared: _____ Date: 9/8/16
Principal: _____ Date: 9/8/16
Superintendent: Engbrecht Date: 9/13/16
Governing Board (if required): _____ Date: _____

Revised 3/2013

REQUEST FOR TRIP APPROVAL

() DAY TRIP OUTSIDE LOS ANGELES, VENTURA, ORANGE AND RIVERSIDE COUNTIES (East of I-215)

() OVERNIGHT / OUT-OF-STATE TRIPS

REQUESTS SHALL BE SUBMITTED IN WRITING 30 DAYS PRIOR TO THE TRIP DATE (DAY TRIPS) AND SUBMITTED 45 DAYS IN ADVANCE OF OUT-OF-STATE TRIPS / OVERNIGHT TRIPS (REGARDLESS OF DESTINATION) AND SHALL INCLUDE THE NAMES OF ALL DISTRICT-APPROVED SUPERVISORS. TRIP APPROVAL REQUESTS THAT ARE INCOMPLETE OR ARE SUBMITTED AFTER THE DEADLINE FOR SUBMISSION WILL BE DENIED, WITH THE EXCEPTION OF CIF PLAYOFF COMPETITION. ANY CHANGES TO THE INFORMATION PROVIDED ON THIS REQUEST FOR TRIP APPROVAL MADE AFTER THE FORM IS SUBMITTED MUST BE SENT IN A WRITTEN MEMORANDUM TO THE SUPERINTENDENT'S OFFICE PRIOR TO THE TRIP.

DATE OF REQUEST 8-29-16 SCHOOL: HART
 GROUP: CROSS COUNTRY - GIRLS ADVISOR/COACH: L. DAVID
 TRIP DAYS/DATES: 10/7 - 10/8/16 DEPARTURE TIME: 2:00 PM RETURN TIME: 8:00 PM
 DESTINATION: CLOVIS - WOODWARD PARK
 METHOD OF TRANSPORTATION: Autos with District approved drivers Parents driving their own students
 *IF METHOD OF TRANSPORTATION IS BY BUS, CHECK THE FOLLOWING: () SCHOOL BUS - LEVEL(S) _____ () CHARTER BUS - LEVEL(S) _____

Transportation for day trips outside Los Angeles, Ventura, Orange, Riverside (east of I-215) Counties may not be made by private or rental vehicles. All School Bus, Charter and SPAB Transportation for any trip inside the State of California must be made through the District Transportation Department. Groups traveling out of state shall ensure that utilized transportation meets the legal requirements for the transportation of pupils outside of California. All charter bus reservations must be paid for by the group and will not be funded by the District, with the exception of CIF semi-finals, where the school will pay any costs above the funding for a regular school bus. The District will pay the full cost of charter buses for CIF Finals contests.

PURPOSE OR JUSTIFICATION FOR TRIP: INVITATIONAL
 HOW MANY DAYS/PERIODS WILL STUDENTS BE ABSENT? 0 DAYS OR 0 PERIODS
 ACCOMMODATIONS (Include complete address): FAIRFIELD INN 50 N. CLOVIS AVE 93612
 NUMBER OF SUBSTITUTE TEACHERS REQUIRED: 0 substitute(s) for _____ DAYS OR _____ PERIODS
 FUNDING SOURCE FOR SUBSTITUTE TEACHERS: N/A

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

() TRANSPORTATION: FUNDRAISING
 () LODGING & OTHER: FUNDRAISING

NUMBER OF STUDENTS PARTICIPATING: Male: _____ Female: 12 Total: 12

CERTIFICATED GROUP LEADER: L. DAVID CELL PHONE: _____

A minimum of two supervisors is required per bus. For overnight and out-of-state trips, a ratio of 1 supervisor per 12 students is required. Where the student group is co-ed, both male and female supervisors shall accompany the group. (Indicate supervisors' status: asterisk (*) for certificated employees; plus sign (+) for classified or other employee of the District, and number sign (#) for persons that will transport students).

NAME(S) OF MALE SUPERVISORS: *LARRY DAVID#

NAME(S) OF FEMALE SUPERVISORS: *Linda Peckham#

Site Administrators shall consider adherence to Board Policies relative to transportation, supervisors, the impact of student absences from class, and the need for substitutes when approving a trip. Expenses for trips must be borne by the school or group taking the trip, with the exception of CIF playoff competition or league affiliated trips.

Site administrator verification that supervisors have been cleared: _____ Date: 9/8/16
 Principal: _____ Date: 9/8/16
 Superintendent: Lightfoot Date: 9/13/16
 Governing Board (if required): _____ Date: _____

Revised 3/2013

REQUEST FOR TRIP APPROVAL

002789

() DAY TRIP OUTSIDE LOS ANGELES, VENTURA, ORANGE AND RIVERSIDE COUNTIES (East of I-215)
() OVERNIGHT / OUT-OF-STATE TRIPS

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DATE OF REQUEST: 9/2/16 SCHOOL: William S. Hart High School
GROUP: Hart Regiment Band ADVISOR/COACH: Anthony Bailey
TRIP DAYS/DATES: 10/21/16, 10/22/16, 10/23/16 DEPARTURE TIME: 6:30am RETURN TIME: 4:30pm
DESTINATION: CEFCU Stadium, Home of the Spartans 1251 S. 10th St. San Jose, CA 95112
METHOD OF TRANSPORTATION: Bus

*IF METHOD OF TRANSPORTATION IS BY BUS, CHECK THE FOLLOWING: () SCHOOL BUS - LEVEL(S) _____ (X) CHARTER BUS - LEVEL(S) 3

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PURPOSE OR JUSTIFICATION FOR TRIP: Bands of America Regionals
HOW MANY DAYS/PERIODS WILL STUDENTS BE ABSENT? 1 DAYS OR _____ PERIODS
ACCOMMODATIONS (Include complete address): DoubleTree Newark-Fremont 39900 Balentine Dr. Newark, CA 9456
NUMBER OF SUBSTITUTE TEACHERS REQUIRED: 1 substitute(s) for 1 DAYS OR _____ PERIODS
FUNDING SOURCE FOR SUBSTITUTE TEACHERS: PFA

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

(X) TRANSPORTATION: Fundraising/Boosters
(X) LODGING & OTHER: Fundraising/Boosters

NUMBER OF STUDENTS PARTICIPATING: Male: 56 Female: 60 Total: 116

CERTIFICATED GROUP LEADER: Anthony Bailey, Band Director CELL PHONE: _____
A minimum of two supervisors is required per bus. For overnight and out-of-state trips, a ratio of 1 supervisor per 12 students is required. Where the student group is co-ed, both male and female supervisors shall accompany the group. (Indicate supervisors' status: asterisk (*) for certificated employees; plus sign (+) for classified or other employee of the District, and number sign (#) for persons that will transport students).

NAME(S) OF MALE SUPERVISORS: Michael Rose, Barry Senft, Tim Ballou

NAME(S) OF FEMALE SUPERVISORS: Kathy Singley, Christine Johann, Lynne Rose, Cathy McNulty, Lynn Larkb, Lori Senft, Sarah Ford, Sally Hall-Schmauss

Site Administrators shall consider adherence to Board Policies relative to transportation, supervisors, the impact of student absences from class, and the need for substitutes when approving a trip. Expenses for trips must be borne by the school or group taking the trip, with the exception of CIF playoff competition or league affiliated trips.

Site administrator verification that supervisors have been cleared:

Principal:

Superintendent:

Governing Board (if required)

Date:

Date:

Date:

Date:

Revised 3/2013

White Superintendent's Office Yellow Transportation Pink School Gold Originator

REQUEST FOR TRIP APPROVAL

() DAY TRIP OUTSIDE LOS ANGELES, VENTURA, ORANGE AND RIVERSIDE COUNTIES (East of I-215)

☒ OVERNIGHT / OUT-OF-STATE TRIPS

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DATE OF REQUEST: 8/24/16 SCHOOL: HART
 GROUP: CHOIR ADVISOR/COACH: GAIL HART
 TRIP DAYS/DATES: MARCH 30 - April 5, 2017 DEPARTURE TIME: 6 AM RETURN TIME: 8 PM
 DESTINATION: London, England
 METHOD OF TRANSPORTATION: plane School Bus to transport students to / from Hart / Airport
 *IF METHOD OF TRANSPORTATION IS BY BUS, CHECK THE FOLLOWING: ☒ SCHOOL BUS - LEVEL(S) LAX ☐ CHARTER BUS - LEVEL(S) _____

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PURPOSE OR JUSTIFICATION FOR TRIP: performance / cultural

HOW MANY DAYS/PERIODS WILL STUDENTS BE ABSENT? _____ DAYS OR _____ PERIODS

ACCOMMODATIONS (Include complete address): Crowne Plaza London - The City

NUMBER OF SUBSTITUTE TEACHERS REQUIRED: 1 substitute(s) for 2 DAYS OR _____ PERIODS

FUNDING SOURCE FOR SUBSTITUTE TEACHERS: principal fund

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

() TRANSPORTATION: fundraising

() LODGING & OTHER: fundraising

NUMBER OF STUDENTS PARTICIPATING: Male: 17 Female: 60 Total: 77

CERTIFICATED GROUP LEADER: * GAIL HART * John Turner CELL PHONE: _____

A minimum of two supervisors is required per bus. For overnight and out-of-state trips, a ratio of 1 supervisor per 12 students is required. Where the student group is co-ed, both male and female supervisors shall accompany the group. (Indicate supervisors' status: asterisk (*) for certificated employees; plus sign (+) for classified or other employee of the District, and number sign (#) for persons that will transport students).

NAME(S) OF MALE SUPERVISORS: Steven Hart, Terry Gallimore

NAME(S) OF FEMALE SUPERVISORS: Mary Rosebrock, Robin Hyland, Laina

Burckert, Shonna August, Karen Deegan,

Tami Villar, Shauna Williams

Site Administrators shall consider adherence to Board Policies relative to transportation, supervisors, the impact of student absences from class, and the need for substitutes when approving a trip. Expenses for trips must be borne by the school or group taking the trip, with the exception of CIF playoff competition or league affiliated trips.

Site administrator verification that supervisors have been cleared: [Signature] Date: 8/26/16

Principal: [Signature] Date: 9/8/16

Superintendent: [Signature] Date: 9/13/16

Governing Board (if required): _____ Date: _____

Revised 3/2013

19 New Bridge Street
London, EC4V 6DB

REQUEST FOR TRIP APPROVAL

002858

() DAY TRIP OUTSIDE LOS ANGELES, VENTURA, ORANGE AND RIVERSIDE COUNTIES (East of I-215)
☒ OVERNIGHT / OUT-OF-STATE TRIPS

REQUESTS SHALL BE SUBMITTED IN WRITING 30 DAYS PRIOR TO THE TRIP DATE (DAY TRIPS) AND SUBMITTED 45 DAYS IN ADVANCE OF OUT-OF-STATE TRIPS / OVERNIGHT TRIPS (REGARDLESS OF DESTINATION) AND SHALL INCLUDE THE NAMES OF ALL DISTRICT-APPROVED SUPERVISORS. TRIP APPROVAL REQUESTS THAT ARE INCOMPLETE OR ARE SUBMITTED AFTER THE DEADLINE FOR SUBMISSION WILL BE DENIED, WITH THE EXCEPTION OF CIF PLAYOFF COMPETITION. ANY CHANGES TO THE INFORMATION PROVIDED ON THIS REQUEST FOR TRIP APPROVAL MADE AFTER THE FORM IS SUBMITTED MUST BE SENT IN A WRITTEN MEMORANDUM TO THE SUPERINTENDENT'S OFFICE PRIOR TO THE TRIP.

DATE OF REQUEST: 9/12/16 SCHOOL: Valencia
GROUP: CSF/REACH ADVISOR/COACH: Alison Henry
TRIP DAYS/DATES: Oct. 3-4, 2016 DEPARTURE TIME: 6am RETURN TIME: 12:00am
DESTINATION: San Diego College Trip
METHOD OF TRANSPORTATION: Charter Bus

*IF METHOD OF TRANSPORTATION IS BY BUS, CHECK THE FOLLOWING: () SCHOOL BUS - LEVEL(S) _____ (☒) CHARTER BUS - LEVEL(S) 1

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PURPOSE OR JUSTIFICATION FOR TRIP: College Visits - UCSD/SDSU/USD

HOW MANY DAYS/PERIODS WILL STUDENTS BE ABSENT? 0 DAYS OR _____ PERIODS

ACCOMMODATIONS (Include complete address): Holiday Inn Express, 9888 Mira Mesa Blvd.,
San Diego, CA 92131

NUMBER OF SUBSTITUTE TEACHERS REQUIRED: 0 substitute(s) for _____ DAYS OR _____ PERIODS

FUNDING SOURCE FOR SUBSTITUTE TEACHERS: N/A

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

(☒) TRANSPORTATION: ASB Trust Acct # 2355

(☒) LODGING & OTHER: ASB Trust Acct # 2355

NUMBER OF STUDENTS PARTICIPATING: Male: 5 Female: 17 Total: 22

CERTIFICATED GROUP LEADER: *Alison Henry CELL PHONE: _____

A minimum of two supervisors is required per bus. For overnight and out-of-state trips, a ratio of 1 supervisor per 12 students is required. Where the student group is co-ed, both male and female supervisors shall accompany the group. (Indicate supervisors' status: asterisk (*) for certificated employees; plus sign (+) for classified or other employee of the District, and number sign (#) for persons that will transport students).

NAME(S) OF MALE SUPERVISORS: *Doug Broers

NAME(S) OF FEMALE SUPERVISORS: *Jennene Margrave

Site Administrators shall consider adherence to Board Policies relative to transportation, supervisors, the impact of student absences from class, and the need for substitutes when approving a trip. Expenses for trips must be borne by the school or group taking the trip, with the exception of CIF playoff competition or league affiliated trips.

Site administrator verification that supervisors have been cleared: [Signature]

Date: 9/12/16

Principal: [Signature]

Date: 9/12/16

Superintendent: [Signature]

Date: 9/13/16

Governing Board (if required): _____

Date: _____

Revised 3/2013

White / Superintendent's Office Yellow / Transportation Pink / School Gold / Originator

REQUEST FOR TRIP APPROVAL

() DAY TRIP OUTSIDE LOS ANGELES, VENTURA, ORANGE AND RIVERSIDE COUNTIES (East of I-215)

☒ OVERNIGHT / OUT-OF-STATE TRIPS

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DATE OF REQUEST: 9/7/16 SCHOOL: ValenciaGROUP: Medical Science Academy ADVISOR/COACH: Joe MonteleoneTRIP DAYS/DATES: 10/23-25, 2016 DEPARTURE TIME: 11am RETURN TIME: 10pmDESTINATION: Universities in San Diego area, and DisneylandMETHOD OF TRANSPORTATION: Pacific Coachways (set up by our transportation dept.)*IF METHOD OF TRANSPORTATION IS BY BUS, CHECK THE FOLLOWING: () SCHOOL BUS - LEVEL(S) _____ ☒ CHARTER BUS - LEVEL(S) _____

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PURPOSE OR JUSTIFICATION FOR TRIP: College tour for MSA studentsHOW MANY DAYS/PERIODS WILL STUDENTS BE ABSENT? 2 DAYS OR _____ PERIODSACCOMMODATIONS (Include complete address): 1-Residence Inn Mission Valley, 1865 Hotel Circle SouthNUMBER OF SUBSTITUTE TEACHERS REQUIRED: 4 substitute(s) for 2 DAYS OR _____ PERIODS San Diego, CA 92108*FUNDING SOURCE FOR SUBSTITUTE TEACHERS: Perkins Grant

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

☒ TRANSPORTATION: Perkins Grant☒ LODGING & OTHER: FundraisingNUMBER OF STUDENTS PARTICIPATING: Male: 23 Female: 46 Total: 69CERTIFICATED GROUP LEADER: Joe Monteleone CELL PHONE: _____

A minimum of two supervisors is required per bus. For overnight and out-of-state trips, a ratio of 1 supervisor per 12 students is required. Where the student group is co-ed, both male and female supervisors shall accompany the group. (Indicate supervisors' status: asterisk (*) for certificated employees; plus sign (+) for classified or other employee of the District, and number sign (#) for persons that will transport students).

NAME(S) OF MALE SUPERVISORS: *Joe Monteleone, *Jeff Gilkey

* 2nd hotel - Travelodge, 1057 W. Ball Road, Anaheim, CA 92802
NAME(S) OF FEMALE SUPERVISORS: *Brenda Monteleone, *Tamara Desso, *Elizabeth Wilson

Nicole Wertz

Site Administrators shall consider adherence to Board Policies relative to transportation, supervisors, the impact of student absences from class, and the need for substitutes when approving a trip. Expenses for trips must be borne by the school or group taking the trip with the exception of CIF playoff competition or league affiliated trips.

Site administrator verification that supervisors have been cleared:

Principal: _____

Superintendent: _____

Governing Board (if required): _____

Date: 9/7/16Date: 9/7/16Date: 9/13/16

Date: _____

Revised 3/2013

REQUEST FOR TRIP APPROVAL

002838

() DAY TRIP OUTSIDE LOS ANGELES, VENTURA, ORANGE AND RIVERSIDE COUNTIES (East of I-215)

☒ OVERNIGHT / OUT-OF-STATE TRIPS

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DATE OF REQUEST: 9/6/16 SCHOOL: WRHS
GROUP: Cross Country ADVISOR/COACH: Sara Soltani
TRIP DAYS/DATES: 10/8 - 10/9/16 DEPARTURE TIME: 10/7 11 AM RETURN TIME: 10/9 6 PM
DESTINATION: Oceanside, Ca
METHOD OF TRANSPORTATION: bus

*IF METHOD OF TRANSPORTATION IS BY BUS, CHECK THE FOLLOWING: () SCHOOL BUS - LEVEL(S) _____ ☒ CHARTER BUS - LEVEL(S) _____

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PURPOSE OR JUSTIFICATION FOR TRIP: Track Meet

HOW MANY DAYS/PERIODS WILL STUDENTS BE ABSENT? 0 DAYS OR 0 PERIODS

ACCOMMODATIONS (Include complete address): Best Western Plus, Oceanside Palms, Oceanside, Ca

NUMBER OF SUBSTITUTE TEACHERS REQUIRED: 0 substitute(s) for _____ DAYS OR _____ PERIODS

FUNDING SOURCE FOR SUBSTITUTE TEACHERS: 0

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

☒ TRANSPORTATION: fundraising + donation
☒ LODGING & OTHER: fundraising + donation

NUMBER OF STUDENTS PARTICIPATING: Male: 10 Female: 10 Total: 20

CERTIFICATED GROUP LEADER: * Sara Soltani CELL PHONE: _____

A minimum of two supervisors is required per bus. For overnight and out-of-state trips, a ratio of 1 supervisor per 12 students is required. Where the student group is co-ed, both male and female supervisors shall accompany the group. (Indicate supervisors' status: asterisk (*) for certificated employees; plus sign (+) for classified or other employee of the District, and number sign (#) for persons that will transport students).

NAME(S) OF MALE SUPERVISORS: + Michael Sterkel, + Jack Hayenmiller, + Steven Low

NAME(S) OF FEMALE SUPERVISORS: * Sara Soltani, + Cyndi Hoelzel

Site Administrators shall consider adherence to Board Policies relative to transportation, supervisors, the impact of student absences from class, and the need for substitutes when approving a trip. Expenses for trips must be borne by the school or group taking the trip, with the exception of CIF playoff competition or league affiliated trips.

Site administrator verification that supervisors have been cleared: Bingulison Date: 9/6/16

Principal: Mark Crawford Date: 9/6/16

Superintendent: W. Hughes Date: 9/13/16

Governing Board (if required): _____ Date: _____

Revised 3/2013