

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: 5/11/17 SCHOOL: Canyon
GROUP: Girls Basketball ADVISOR/COACH: Jessica Haayer
TRIP DAYS/DATES: 7/14, 7/15, 7/16/17 DEPARTURE TIME: 10 am RETURN TIME: 7 pm
DESTINATION: Palm Springs
METHOD OF TRANSPORTATION: cleared ^{District approved} coaches & cleared parents

*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: Palm Springs Basketball Tournament

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

ACCOMMODATIONS (Include complete address): Courtyard Palm Springs, 1300 E. Tahquitz Canyon Way

NUMBER OF SUBSTITUTE TEACHERS REQUIRED: N/A substitute(s) for _____ DAYS OR _____ PERIODS Palm Springs, CA 92262

FUNDING SOURCE FOR SUBSTITUTE TEACHERS: _____

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

TRANSPORTATION: Booster Club

LODGING & OTHER: Booster Club

NUMBER OF STUDENTS PARTICIPATING: Male: _____ Female: 13 Total: 13

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 Brooner

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

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: 5/12/17

Principal: Just Date: 5/12/17

Superintendent: DeGruhecht Date: 5/25/17

Governing Board (if required): _____ Date: _____

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: 6/7/17 SCHOOL: Canyon High
GROUP: Cheer ADVISOR/COACH: Loni Pennay
TRIP DAYS/DATES: 7/19 - 7/21/17 DEPARTURE TIME: 7am RETURN TIME: 6pm
DESTINATION: UCSB

METHOD OF TRANSPORTATION: School bus there, Parents pick up 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: Competition

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

ACCOMMODATIONS (Include complete address): UCSB Dorms, 1210 Cheadle Hall, Santa Barbara 93106

NUMBER OF SUBSTITUTE TEACHERS REQUIRED: N/A substitute(s) for _____ DAYS OR _____ PERIODS

FUNDING SOURCE FOR SUBSTITUTE TEACHERS: _____

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

TRANSPORTATION: student fundraising
 LODGING & OTHER: " "

NUMBER OF STUDENTS PARTICIPATING: Male: 0 Female: 84 Total: 84

CERTIFICATED GROUP LEADER: Loni Pennay 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: _____

NAME(S) OF FEMALE SUPERVISORS: * Loni Pennay, + Maria Rodriguez, Madison Cox, Emma Prior, Brandee Cox, Jodi Prior, Tiffany Night

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: 6/7/17
Principal: [Signature] Date: 6/7/17
Superintendent: [Signature] Date: 6/8/17
Governing Board (if required): _____ Date: _____

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: 5/22/17 SCHOOL: Golden Valley H.S.
GROUP: ASB ADVISOR/COACH: Husted / Leite
TRIP DAYS/DATES: July 7, 2017 - July 10, 2017 DEPARTURE TIME: 8:30 AM RETURN TIME: 3 pm
DESTINATION: UCSB - CADA Leadership Camp
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: Student Leadership Camp

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

ACCOMMODATIONS (Include complete address): Dorms, UCSB 552 University Rd. Santa Barbara

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

FUNDING SOURCE FOR SUBSTITUTE TEACHERS: ASB

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

() TRANSPORTATION: ASB

() LODGING & OTHER: ASB

NUMBER OF STUDENTS PARTICIPATING: Male: 5 Female: 7 Total: 12

CERTIFICATED GROUP LEADER: Tricia Husted* 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: Paulo Leite*

NAME(S) OF FEMALE SUPERVISORS: Jennifer Leite*, Tricia Husted*

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: Gimbrone Date: 5/22/17

Principal: [Signature] Date: 5/23/17

Superintendent: [Signature] Date: 6/15/17

Governing Board (if required): _____ Date: _____

REQUEST FOR TRIP APPROVAL

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

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DATE OF REQUEST: 5-17-17 SCHOOL: Golden Valley High School

GROUP: Cheer ADVISOR/COACH: Melissa Brewer

TRIP DAYS/DATES: July 21, 22, 23 2017 DEPARTURE TIME: 7am RETURN TIME: 6pm

DESTINATION: The Hyatt Regency Resort and Spa

METHOD OF TRANSPORTATION: Bus to / Return Trip: Parents will drive their child only home

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

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PURPOSE OR JUSTIFICATION FOR TRIP: Cheer Summer Camp

HOW MANY DAYS/PERIODS WILL STUDENTS BE ABSENT? 3 DAYS OR _____ PERIODS Not missing school - during Summer

ACCOMMODATIONS (Include complete address): 44600 Indian Well Ln, Indian Wells, CA 92210

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

FUNDING SOURCE FOR SUBSTITUTE TEACHERS: NA

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

(X) TRANSPORTATION: Parents and fundraising

(X) LODGING & OTHER: Parents of each cheerleader pay for their cheerleader's lodging

NUMBER OF STUDENTS PARTICIPATING: Male: _____ Female: 53 Total: 53 (Optional Summer activity)

CERTIFICATED GROUP LEADER: Melissa Brewer 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: ✓ Edward Santos +
✓ Thomas Flores *

NAME(S) OF FEMALE SUPERVISORS: ✓ Melissa Brewer *
✓ Brianna Ortiz +
✓ Ashley Thomas

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: 5-18-17

Principal: [Signature] Date: 5/18/17

Superintendent: [Signature] Date: 5/25/17

Governing Board (if required): _____ Date: _____

REQUEST FOR TRIP APPROVAL

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(XX) 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: MAY 10, 2017 SCHOOL: SAUGUS

GROUP: CHEER ADVISOR/COACH: CANDACE ROGERS

TRIP DAYS/DATES: JUNE 26-29, 2017 DEPARTURE TIME: 7:45 am RETURN TIME: 3:00 pm

DESTINATION: RENAISSANCE ESMERALDA RESORT & SPA, 44-400 INDIAN WELLS LANE, INDIAN WELLS CA 92210

METHOD OF TRANSPORTATION: BUS AND DISTRICT APPROVED DRIVERS OR PARENTS DRIVING ONLY OWN STUDENT.

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

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PURPOSE OR JUSTIFICATION FOR TRIP: FOR SAUGUS CHEER TEAM TO ATTEND SUMMER CAMP

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

ACCOMMODATIONS (Include complete address): RENAISSANCE ESMERALDA RESORT & SPA, 44-400 INDIAN WELLS LANE INDIAN WELLS, CA 92210

NUMBER OF SUBSTITUTE TEACHERS REQUIRED: 0 substitute(s) for _____ DAYS OR _____ PERIODS 760-773-4444

FUNDING SOURCE FOR SUBSTITUTE TEACHERS: _____

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

TRANSPORTATION: SAUGUS CHEER BOOSTER TO PAY FOR CHARTER BUS TRANSPORTATION

LODGING & OTHER: PARENT FUNDED (OPTIONAL SUMMER ACTIVITY)

NUMBER OF STUDENTS PARTICIPATING: Male: _____ Female: 56 Total: 56

CHARISSA ELVINGTON ✓

CERTIFICATED GROUP LEADER: _____ 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. At least one 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: NONE

NAME(S) OF FEMALE SUPERVISORS: _____, GLENNA PANARISI, JAMIE ORR, PATRICIA PARKER, PENNI HERNANDEZ, JENNIFER AGUILAR, LAINIE JOHNSON

CANDACE HOLLINGER ROGERS +

CHARISSA ELVINGTON *

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: Miane Hamburger Date: 5-10-17

Principal: Beel Beel Date: 5/10/17

Superintendent: Ungurecht Date: 5/17/17

Governing Board (if required): _____ Date: _____

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DATE OF REQUEST: May 11, 2017 SCHOOL: Saugus High

GROUP: Saugus Dance Team ADVISOR/COACH: Kara Hess

TRIP DAYS/DATES: July 20-23, 2017 DEPARTURE TIME: 8 am RETURN TIME: 8 pm

DESTINATION: USA Summer Dance Camp, Cal Lutheran Univ., 60 W. Olsen Rd., Thousand Oaks, CA

METHOD OF TRANSPORTATION: District / approved drivers and parents driving own child to and from event

*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: Team training

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

ACCOMMODATIONS (Include complete address): Cal Lutheran dormitories 60 W. Olsen Rd., Thousand Oaks

NUMBER OF SUBSTITUTE TEACHERS REQUIRED: 805-493-3051 substitute(s) for _____ DAYS OR _____ PERIODS

FUNDING SOURCE FOR SUBSTITUTE TEACHERS: N/A

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

() TRANSPORTATION: N/A

(X) LODGING & OTHER: Booster club

NUMBER OF STUDENTS PARTICIPATING: Male: 0 Female: 20 Total: 20

CERTIFICATED GROUP LEADER: Bill Bolde 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: Bill Bolde * ✓

NAME(S) OF FEMALE SUPERVISORS: Kara Hess, Karissa Petersen, Jody Bolde ✓ ✓ ✓

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: 5-12-17

Principal: [Signature] Date: 5-12-17

Superintendent: [Signature] Date: 5/25/17

Governing Board (if required): _____ Date: _____

REQUEST FOR TRIP APPROVAL

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(X) OVERNIGHT / OUT-OF-STATE TRIPS

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DATE OF REQUEST: May 11, 2017 SCHOOL: Saugus High

GROUP: Saugus Dance Team ADVISOR/COACH: Kara Hess

TRIP DAYS/DATES: July 28-30, 2017 DEPARTURE TIME: 8 am RETURN TIME: 8 pm

DESTINATION: West Coast Elite Summer Dance Camp-Wyndham Hotel Anaheim, 12021 Harbor Blvd.,

METHOD OF TRANSPORTATION: District approved drivers and parents Garden Grove, CA

driving only their own child to and from event
*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: Team training

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

ACCOMMODATIONS (Include complete address): Wyndham Hotel Anaheim, 12021 Harbor Blvd., Garden Grove
800-996-3426

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:

(X) TRANSPORTATION: N/A

(X) LODGING & OTHER: Booster club

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

CERTIFICATED GROUP LEADER: Bill Bolde 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: Bill Bolde*

NAME(S) OF FEMALE SUPERVISORS: Kara Hess, Karissa Petersen, Jody Bolde

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: 5-12-17

Principal: [Signature] Date: 5-12-17

Superintendent: [Signature] Date: 5/25/17

Governing Board (if required): _____ Date: _____

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DATE OF REQUEST: 5/23/17 SCHOOL: Valencia

GROUP: Dance Team ADVISOR/COACH: Michelle Brown

TRIP DAYS/DATES: 7/20 - 7/23/17 DEPARTURE TIME: 8am RETURN TIME: 2pm

DESTINATION: Cal Lutheran University, 60 W. Olsen Rd., Thousand Oaks, CA 91360

METHOD OF TRANSPORTATION: Parents driving their 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: Dance Camp

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

ACCOMMODATIONS (Include complete address): Dorms at Cal Lutheran, 60 W. Olsen Rd., Thousand Oaks, CA 91360

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: N/A

() LODGING & OTHER: Fundraising & donations

NUMBER OF STUDENTS PARTICIPATING: Male: 0 Female: 19 Total: 19

CERTIFICATED GROUP LEADER: Michelle Brown 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: N/A

NAME(S) OF FEMALE SUPERVISORS: *Michelle Brown, Briana Nelson

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: 5/24/17

Principal: _____ Date: 5/24/17

Superintendent: _____ Date: 5/30/17

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: May 8, 2017 SCHOOL: West Ranch High School
GROUP: Boys Basketball ADVISOR/COACH: Dody Garcia/Shant Bicakci
TRIP DAYS/DATES: 6/30 - 7/2/17 DEPARTURE TIME: 6:30am RETURN TIME: 7:12 8pm
DESTINATION: University of California @ San Diego
METHOD OF TRANSPORTATION: Parents will transport their own students only

*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: To participate in UCSO Summer Camp

HOW MANY DAYS/PERIODS WILL STUDENTS BE ABSENT? 2 DAYS OR _____ PERIODS

ACCOMMODATIONS (Include complete address): UCSO Dorms, 9500 Gilman Dr., La Jolla, 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: n/a

LODGING & OTHER: Fundraising, donations, AB Trust Acct

NUMBER OF STUDENTS PARTICIPATING: Male: 15 Female: 0 Total: 15

CERTIFICATED GROUP LEADER: * Dody Garcia 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: Shant Bicakci
James DeMonbrun

NAME(S) OF FEMALE SUPERVISORS: * Dody Garcia

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: 5/9/17

Principal: [Signature] Date: 5/9/17

Superintendent: [Signature] Date: 5/11/17

Governing Board (if required): _____ Date: _____

REQUEST FOR TRIP APPROVAL

() DAY TRIP OUTSIDE LOS ANGELES, VENTURA, ORANGE AND RIVERSIDE COUNTIES (East of I-215)
(X) 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: 5/17/17 SCHOOL: West Ranch High School
GROUP: Girls Basketball ADVISOR/COACH: Carlos Fandino
TRIP DAYS/DATES: July 13-15, 2017 DEPARTURE TIME: _____ RETURN TIME: _____
DESTINATION: Shadow Hills, HS, Palm Springs
METHOD OF TRANSPORTATION: parents will transport own students only-CAR

*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: Basketball Tournament

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

ACCOMMODATIONS (Include complete address): Embassy Suites 74700 CA-111, Palm Desert Ca 92260

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, donations, ASB Tract Acct
- LODGING & OTHER: "

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

CERTIFICATED GROUP LEADER: * Cassandra Perez 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: Carlos Fandino

NAME(S) OF FEMALE SUPERVISORS: * Cassandra Perez

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: 5/25/17
 Principal: [Signature] Date: 5/26/17
 Superintendent: [Signature] Date: 6/15/17
 Governing Board (if required): _____ Date: _____

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: 5/24/17 SCHOOL: West Ranch H.S.
GROUP: Cross Country Team ADVISOR/COACH: Sara Soltani
TRIP DAYS/DATES: July 16 - July 22, 2017 DEPARTURE TIME: 7:16 AM RETURN TIME: 11:22 AM
DESTINATION: Mammoth Lakes Ca.
METHOD OF TRANSPORTATION: Charter bus

*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: Team Bonding & Training

HOW MANY DAYS/PERIODS WILL STUDENTS BE ABSENT? 7 DAYS OR _____ PERIODS

ACCOMMODATIONS (Include complete address): The Station Camp, P.O. Box 9133, Mammoth Lakes Ca 93546

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

FUNDING SOURCE FOR SUBSTITUTE TEACHERS: n/a

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

TRANSPORTATION: Donations, Fundraising - ASC Trust

LODGING & OTHER: _____

NUMBER OF STUDENTS PARTICIPATING: Male: 24 Female: 24 Total: 48

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: Steven Low
Rodrigo Ornelas

NAME(S) OF FEMALE SUPERVISORS: * Sara Soltani
Cynthia 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: [Signature] Date: 5/26/17
Principal: [Signature] Date: 5/26/17
Superintendent: [Signature] Date: 6/7/17
Governing Board (if required): _____ Date: _____

REQUEST FOR TRIP APPROVAL

() DAY TRIP OUTSIDE LOS ANGELES, VENTURA, ORANGE AND RIVERSIDE COUNTIES (East of I-215)
(X) 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: May 30, 2016 SCHOOL: West Ranch H.S.
GROUP: West Ranch Dance ADVISOR/COACH: Jamie Johnston
TRIP DAYS/DATES: 7/20-23, 2017 DEPARTURE TIME: 7:20 AM RETURN TIME: 9:23 PM
DESTINATION: Cal. Lutheran University
METHOD OF TRANSPORTATION: Parent to transport their own student only

*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: To prepare for USA Nationals

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

ACCOMMODATIONS (Include complete address): Dorms 60.W. Olsen Rd Thousand Oaks Ca 91360

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:

(X) TRANSPORTATION: n/a
() LODGING & OTHER: fundraising, donations - ASB Trust

NUMBER OF STUDENTS PARTICIPATING: Male: _____ Female: 16 Total: 16

CERTIFICATED GROUP LEADER: * Michelle Brown 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: _____

NAME(S) OF FEMALE SUPERVISORS: * Michelle Brown
Jamie Johnston

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: 5/31/17

Principal: [Signature] Date: 5/31/17

Superintendent: [Signature] Date: 6/7/17

Governing Board (if required): _____ Date: _____

REQUEST FOR TRIP APPROVAL

() DAY TRIP OUTSIDE LOS ANGELES, VENTURA, ORANGE AND RIVERSIDE COUNTIES (East of I-215)
(X) 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: 5/31/17 SCHOOL: West Ranch High School
GROUP: Yearbook ADVISOR/COACH: *Terri Sage
TRIP DAYS/DATES: 7/29 - 8/2/17 DEPARTURE TIME: 7:29 AM RETURN TIME: 7pm 8/2
DESTINATION: Cal State Long Beach
METHOD OF TRANSPORTATION: Parents will transport their 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: Yearbook Training & Leadership Camps

HOW MANY DAYS/PERIODS WILL STUDENTS BE ABSENT? DAYS OR PERIODS 1250 Bellflower Blvd.

ACCOMMODATIONS (Include complete address): Cal State Long Beach Long Beach, CA 90840

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

FUNDING SOURCE FOR SUBSTITUTE TEACHERS: Hoff Jones

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

() TRANSPORTATION: n/a

() LODGING & OTHER: Hoff Jones

NUMBER OF STUDENTS PARTICIPATING: Male: _____ Female: 8 Total: 8

CERTIFICATED GROUP LEADER: Terri Sage & Jennifer O'Shea 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: _____

NAME(S) OF FEMALE SUPERVISORS: * Terri Sage

* Jennifer O'Shea

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: Susan Wilson Date: 5/31/17

Principal: [Signature] Date: 5/31/17

Superintendent: [Signature] Date: 6/12/17

Governing Board (if required): _____ Date: _____

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: 5-23-17 SCHOOL: La Mesa Jr. High
GROUP: ASB ADVISOR/COACH: Mark Overdivest
TRIP DAYS/DATES: 7/23/17 - 7/25/17 DEPARTURE TIME: 8:00am RETURN TIME: 5:00pm
DESTINATION: CADA Camp - UCSB, Santa Barbara, CA 91306
METHOD OF TRANSPORTATION: School 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: CADA Camp

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

ACCOMMODATIONS (Include complete address): 552 University Rd. Santa Barbara, CA 91306

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

LODGING & OTHER: ASB

NUMBER OF STUDENTS PARTICIPATING: Male: 2 Female: 5 Total: 7

CERTIFICATED GROUP LEADER: [Signature] 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: Mark Overdivest

NAME(S) OF FEMALE SUPERVISORS: Laura Beers

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: 5/23/17

Principal: [Signature] Date: 5/23/17

Superintendent: [Signature] Date: 5/30/17

Governing Board (if required): _____ Date: _____