

002946

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: 5-9-18 SCHOOL: Golden Valley High School
 GROUP: Cheer ADVISOR/COACH: Melissa Brewer
 TRIP DAYS/DATES: July 13-15/18 DEPARTURE TIME: 7am^{7/13} RETURN TIME: 5pm^{7/15}
 DESTINATION: Great Wolf Lodge 12681 Harbor Blvd. Garden Grove, CA 92840
 METHOD OF TRANSPORTATION: Bus to camp. Cheer parents will pick up their kid from camp.

*IF METHOD OF TRANSPORTATION IS BY BUS, CHECK THE FOLLOWING: (X) 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: Cheer Camp

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

ACCOMMODATIONS (Include complete address): 12681 Harbor Blvd. Garden Grove, CA 92840

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:

Optional Summer Activity

(X) TRANSPORTATION: Cheer parent donations and fundraiser

(X) LODGING & OTHER: Cheer parent donations and fundraiser

NUMBER OF STUDENTS PARTICIPATING: Male: 0 Female: 44 Total: 44

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: NA

NAME(S) OF FEMALE SUPERVISORS: *Melissa Brewer Ryan Bull

Dulce Rendon

Brianna Ortiz

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: ABP Date: 5/25/18

Principal: Sel Ju Date: 5/31/18

Superintendent: _____ Date: _____

Governing Board (if required): _____ Date: _____

Revised 3/2013

REQUEST FOR TRIP APPROVAL

003159

() 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: 5-7-18 SCHOOL: Saugus

GROUP: Dance ADVISOR/COACH: Kara Hess

TRIP DAYS/DATES: July 20-22, 2018 DEPARTURE TIME: 7:00PM RETURN TIME: 7:00PM

DESTINATION: Great Wolf Lodge - Garden Grove

METHOD OF TRANSPORTATION: Parents Driving only their own child to & from camp.

*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: WCE Dance Camp

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

ACCOMMODATIONS (Include complete address): Great Wolf Lodge 12681 Harbor Blvd, Garden Grove CA 92840

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:

(X) TRANSPORTATION: Parent Funded (Optional Summer Activity)

(X) LODGING & OTHER: Dance Booster / Parent Funded (Optional Summer Activity)

NUMBER OF STUDENTS PARTICIPATING: Male: N/A Female: 20 Total: 20

CERTIFICATED GROUP LEADER: Genevive Peterson 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: _____

NAME(S) OF FEMALE SUPERVISORS: Kara Hess (+) Karissa Peterson (+)

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: 5-8-18

Principal: [Signature] Date: 5-8-18

Superintendent: [Signature] Date: 5/21/18

Governing Board (if required): _____ Date: _____

Revised 3/2013

REQUEST FOR TRIP APPROVAL

003104

() 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: 5/31/18 SCHOOL: Valencia

GROUP: DECA ADVISOR/COACH: Dennis Mifflin

TRIP DAYS/DATES: July 6 - 9, 2018 DEPARTURE TIME: 8am RETURN TIME: 7pm

DESTINATION: Swissotel Chicago, 323 E. Wacker Dr., Chicago, IL 60601

METHOD OF TRANSPORTATION: Van/flight/taxi, District approved driver

*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: CTE Leadership Training

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

ACCOMMODATIONS (Include complete address): Swissotel, 323 E. Wacker Dr., Chicago, IL 60601

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: DECA Grant/Perkins/Incentive Grant

☒ LODGING & OTHER: DECA Grant/Perkins/Incentive Grant

NUMBER OF STUDENTS PARTICIPATING: Male: 1 Female: 2 Total: 3

CERTIFICATED GROUP LEADER: Dennis Mifflin 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: # *Dennis Mifflin

NAME(S) OF FEMALE SUPERVISORS: Janet Mifflin

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: 5/1/18

Principal: [Signature] Date: 5/1/18

Superintendent: [Signature] Date: _____

Governing Board (if required): _____ Date: _____

Revised 3/2013

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

REQUEST FOR TRIP APPROVAL

002973

() 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: 5/1/18 SCHOOL: West Ranch
GROUP: FBLA ADVISOR/COACH: Tanja Brosche
TRIP DAYS/DATES: 6/22 - 6/23/18 DEPARTURE TIME: 12pm RETURN TIME: 8pm
DESTINATION: Sacramento Courtyard Marriott 1782 Tribute Rd. Sacramento, CA
METHOD OF TRANSPORTATION: Plane & shuttle, Parent transport to/from airport

*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: Attend Summit Leadership meeting to plan 18/19 events

HOW MANY DAYS/PERIODS WILL STUDENTS BE ABSENT? 8 DAYS OR 0 PERIODS

ACCOMMODATIONS (Include complete address): Sacramento Courtyard Marriott (Cal Expo) 1782 Tribute Rd Sacramento

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: FBLA Trust

✓ LODGING & OTHER: "

NUMBER OF STUDENTS PARTICIPATING: Male: 1 Female: 0 Total: 1

CERTIFICATED GROUP LEADER: *Tanja Brosche 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 Hughes

NAME(S) OF FEMALE SUPERVISORS: * Tanja Brosche
✓ Mrs Linda Sim (Parent of student)
Will stay with student

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: 5/9/18

Date: 5/31/18

Date: _____

Revised 3/2013

REQUEST FOR TRIP APPROVAL

002978

() 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: 5/10/18 SCHOOL: West Ranch
 GROUP: Girls Basketball ADVISOR/COACH: Carlos Fandino
 TRIP DAYS/DATES: 7/13- 7/15/18 DEPARTURE TIME: 8am RETURN TIME: 6pm
 DESTINATION: Embassy Suites Palm Desert 74700 CA-111 Palm Desert CA 92260
 METHOD OF TRANSPORTATION: Parents transporting own kids - 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: Basketball tournament

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

ACCOMMODATIONS (Include complete address): 74700 CA-111 Palm Desert CA 92260

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

FUNDING SOURCE FOR SUBSTITUTE TEACHERS: 10/1A

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

() TRANSPORTATION: Fundraising, donations, ASB Trust

() LODGING & OTHER: Fundraising, donations, ASB Trust

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: [Signature] Date: _____

Principal: [Signature] Date: 5/11/18

Superintendent: [Signature] Date: 5/24/18

Governing Board (if required): _____ Date: _____

Revised 3/2013

REQUEST FOR TRIP APPROVAL

003193

() 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 18, 2018 SCHOOL: West Ranch
 GROUP: WR ASB ADVISOR/COACH: Tracie Priske
 TRIP DAYS/DATES: 7/22 - 7/25/18 DEPARTURE TIME: 8am RETURN TIME: 3pm 7/25
 DESTINATION: UCSB - CAO4 Summer Camp
 METHOD OF TRANSPORTATION: Car - district approved driver - Tracie Priske

*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: Leadership building

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

ACCOMMODATIONS (Include complete address): UCSB dorms, 1501 Residential Services, UCSD Santa Barbara

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

FUNDING SOURCE FOR SUBSTITUTE TEACHERS: _____

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

☒ TRANSPORTATION: donations, ASB Trust

☒ LODGING & OTHER: "

NUMBER OF STUDENTS PARTICIPATING: Male: 1 Female: 5 Total: 6

CERTIFICATED GROUP LEADER: * Tracie Priske 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: * Todd Arrowsmith

NAME(S) OF FEMALE SUPERVISORS: * Tracie Priske#

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: _____
 Principal: [Signature] Date: 5/21/18
 Superintendent: [Signature] Date: 5/18/18
 Governing Board (if required): _____ Date: _____

Revised 3/2013

REQUEST FOR TRIP APPROVAL

002979

() 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: 5/10/18 SCHOOL: West RanchGROUP: Cross Country ADVISOR/COACH: Sara SoltaniTRIP DAYS/DATES: 7/22-29/18 DEPARTURE TIME: 9am RETURN TIME: 7pmDESTINATION: Mammoth LakesMETHOD OF TRANSPORTATION: District Van + District 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: High Altitude trainingHOW MANY DAYS/PERIODS WILL STUDENTS BE ABSENT? 0 DAYS OR _____ PERIODSACCOMMODATIONS (Include complete address): 201 Lakeview Blvd Mammoth Lakes CA 93546NUMBER OF SUBSTITUTE TEACHERS REQUIRED: 0 substitute(s) for _____ DAYS OR _____ PERIODSFUNDING SOURCE FOR SUBSTITUTE TEACHERS: N/A

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

() TRANSPORTATION: Fundraising() LODGING & OTHER: FundraisingNUMBER OF STUDENTS PARTICIPATING: Male: 10 Female: 10 Total: 20CERTIFICATED 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: #Steve Low CS Albaskan#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: [Signature] Date: _____Principal: [Signature] Date: 5/11/18Superintendent: [Signature] Date: 5/24/18

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)

(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: 5/15/18 SCHOOL: West Ranch High School
 GROUP: Varsity - JV Cheerleading ADVISOR/COACH: Karina Vargas
 TRIP DAYS/DATES: 7/23 - 7/26/18 DEPARTURE TIME: 7:30am RETURN TIME: noon 7/26
 DESTINATION: Rancho Mirage - UCA Camp
 METHOD OF TRANSPORTATION: Bus to destination, own parents transport home
 *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: Cheerleading Camp
 HOW MANY DAYS/PERIODS WILL STUDENTS BE ABSENT? 0 DAYS OR 0 PERIODS
 ACCOMMODATIONS (Include complete address): Westin, 71333 Dine Shore, Rancho Mirage Ca 92270
 NUMBER OF SUBSTITUTE TEACHERS REQUIRED: 1 substitute(s) for _____ DAYS OR _____ PERIODS
 FUNDING SOURCE FOR SUBSTITUTE TEACHERS: n/a

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID: Optional Summer Activity
☒ TRANSPORTATION: Fundraising, donations & ASB Trust Acct
☒ LODGING & OTHER: "

NUMBER OF STUDENTS PARTICIPATING: Male: 0 Female: 48 Total: 48

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: n/a

NAME(S) OF FEMALE SUPERVISORS: *Cassandra Perez
Karina Vargas, Jayme Shipe, Emiliann O'Connell

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: _____

Principal: [Signature]

Date: 5/15/18

Superintendent: [Signature]

Date: 5/24/18

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: 5/17/18 SCHOOL: West Ranch
 GROUP: WR Dance ADVISOR/COACH: Tammie Johnston
 TRIP DAYS/DATES: 8/2 - 8/5/2018 DEPARTURE TIME: 8:28 am RETURN TIME: 8/5/18 1pm
 DESTINATION: Cal Lutheran University
 METHOD OF TRANSPORTATION: Parents will transport their OWN student 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: Train, lessons, prepare for Competitions

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

ACCOMMODATIONS (Include complete address): Cal Lu. Dorms, 60 W. Olson Rd. Thousand Oaks, Ca

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: fundraising, donations, ASB Trust

() LODGING & OTHER: "

NUMBER OF STUDENTS PARTICIPATING: Male: 1 Female: 15 Total: 15

CERTIFICATED GROUP LEADER: Katie Seegmiller 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: Tammie Johnston

* Katie Seegmiller

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: 5/21/18

Principal: [Signature] Date: 5/21/18

Superintendent: [Signature] Date: 5/21/18

Governing Board (if required): _____ Date: _____

Revised 3/2013