

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: 4/21/22 SCHOOL: Hart High School
GROUP: Cheer ADVISOR/COACH: Brooke Wanjon
TRIP DAYS/DATES: 7/29/22 - 8/1/22 DEPARTURE TIME: 8am RETURN TIME: 12pm
DESTINATION: La Quinta Resort & Club 49-499 Eisenhower Dr. La Quinta, CA 92253
METHOD OF TRANSPORTATION TO DESTINATION: Bus to Camp, Parents Pick-up & Takehome
METHOD OF TRANSPORTATION WHILE AT DESTINATION (EX: FROM AIRPORT TO HOTEL OR HOTEL TO VENUE): N/A
own student

*IF METHOD OF TRANSPORTATION IS BY BUS, CHECK THE FOLLOWING SCHOOL BUS CHARTER BUS

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PURPOSE OR JUSTIFICATION FOR TRIP: Cheer camp
HOW MANY DAYS/PERIODS WILL STUDENTS BE ABSENT? 0 DAYS OR _____ PERIODS
ACCOMMODATIONS (include complete address): La Quinta Resort 49-499 Eisenhower Dr. La Quinta, CA
NUMBER OF SUBSTITUTE TEACHERS REQUIRED: 0 substitute(s) for _____ DAYS OR _____ PERIODS 92253
FUNDING SOURCE FOR SUBSTITUTE TEACHERS: N/A

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

TRANSPORTATION: Booster Club
LODGING & OTHER: Booster Club

NUMBER OF STUDENTS PARTICIPATING: Male: 0 Female: 39 Total: 39

CERTIFICATED GROUP LEADER: Brooke Wanjon 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: Brooke Wanjon* Jaycee Schiente,
Kelly Wanjon+ Tami Villar (# Tamara)

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.

Site administrator verification that supervisors have been cleared: _____ Date: 4/22/22
Principal (signature required): _____ Date: 4/22/22
Superintendent: _____ Date: 4-26-22
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: April 13, 2021 SCHOOL: Saugus High School
GROUP: Future Business Leaders of America (FBLA) ADVISOR/COACH: Dawn Herbert
TRIP DAYS/DATES: June 24 - 25, 2022 DEPARTURE TIME: 7/24 11:30am RETURN TIME: 7/24 4:30pm
DESTINATION: Moorpark College, 7075 Campus Road, Moorpark, CA 93021
METHOD OF TRANSPORTATION: Chaperone Dawn Herbert, District Approved Driver Driving Personal Vehicle

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PURPOSE OR JUSTIFICATION FOR TRIP: CAFBLA Officer Leadership Training Summit 2022

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

ACCOMMODATIONS (Include complete address): Grand Vista Hotel, 999 Enchanted Way, Simi Valley, CA 93065

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

FUNDING SOURCE FOR SUBSTITUTE TEACHERS: N/A

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

TRANSPORTATION: Career Technical Education - CTSO Grant

LODGING & OTHER: California Future Business Leaders of America

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

CERTIFICATED GROUP LEADER: Dawn Herbert 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: None

NAME(S) OF FEMALE SUPERVISORS: Dawn Herbert * #

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.

Site administrator verification that supervisors have been cleared: [Signature] Date: 4.14.22

Principal (signature required): [Signature] Date: 4.14.22

Superintendent: [Signature] Date: 4/22/22

Governing Board (if required): _____ Date: _____

REQUEST FOR TRIP APPROVAL

DAY TRIP OUTSIDE LOS ANGELES, VENTURA, ORANGE AND RIVERSIDE COUNTIES (East of I-215)
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DATE OF REQUEST: March 30, 2022 SCHOOL: Saugus High School

GROUP: Yearbook ADVISOR/COACH: Darren Thomas

TRIP DAYS/DATES: July 14 - 17, 2022 DEPARTURE TIME: 7/14 7:00 AM RETURN TIME: 7/17 5:00 PM

DESTINATION: Walsworth SoCal Yearbooks Summer Workshop - Cal Baptist University

METHOD OF TRANSPORTATION TO DESTINATION: Parents driving their own child

METHOD OF TRANSPORTATION WHILE AT DESTINATION (EX: FROM AIRPORT TO HOTEL OR HOTEL TO VENUE):
N/A - Students on campus the entire trip

*IF METHOD OF TRANSPORTATION IS BY BUS, CHECK THE FOLLOWING SCHOOL BUS CHARTER BUS

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PURPOSE OR JUSTIFICATION FOR TRIP: Yearbook training and development of the 22/23 yearbook

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

ACCOMMODATIONS (Include complete address): Cal Baptist University Dorms - 8432 Magnolia Ave, Riverside, CA

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

FUNDING SOURCE FOR SUBSTITUTE TEACHERS: N/A

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

TRANSPORTATION: Parents driving only their child.

LODGING & OTHER: Walsworth Yearbook Publishing

NUMBER OF STUDENTS PARTICIPATING: Male: 1 Female: 4 Total: 5

CERTIFICATED GROUP LEADER: Darren Thomas 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 Thomas *

_____ ✓ _____

NAME(S) OF FEMALE SUPERVISORS: Jennifer Guzman *

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.

Site administrator verification that supervisors have been cleared: [Signature] Date: 4.14.22

Principal (signature required): [Signature] Date: 4.14.22

Superintendent: [Signature] Date: 4/22/22

Governing Board (if required): _____ Date: _____

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DATE OF REQUEST: 4/12/22 SCHOOL: Saugus High School
GROUP: Saugus Dance Team ADVISOR/COACH: Stacy Hartmann
TRIP DAYS/DATES: July 22 - 24, 2022 DEPARTURE TIME: 7:00 AM RETURN TIME: 1:00 PM
DESTINATION: WCE Summer Dance Experience - Burbank, CA
METHOD OF TRANSPORTATION: Parents are transporting their own child only to and from camp

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PURPOSE OR JUSTIFICATION FOR TRIP: West Coast Elite Dance Camp

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

ACCOMMODATIONS (include complete address): Marriott, 2500 N Hollywood Way, Burbank, CA 91505

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: Parent funded (optional summer activity)

LODGING & OTHER: Dance Booster Club/Parent Funded (optional summer activity)

NUMBER OF STUDENTS PARTICIPATING: Male: 0 Female: 18 Total: 18

CERTIFICATED GROUP LEADER: Stacy Hartmann 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: Stacy Hartmann * Taylor Hansen

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.

Site administrator verification that supervisors have been cleared: [Signature] Date: 4.14.22

Principal (signature required): [Signature] Date: 4.14.22

Superintendent: [Signature] Date: 4-22-22

Governing Board (if required): _____ Date: _____

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DATE OF REQUEST: 03/28/2022 SCHOOL: Valencia High School
GROUP: Medical Science Academy HOSA ADVISOR/COACH: Jonathan Gedalia, Joe Monteleone
TRIP DAYS/DATES: 06/21-26/2022 DEPARTURE TIME: 1000 RETURN TIME: 2000
DESTINATION: Gaylord Opryland Resort and Convention Center - 2800 Opryland Dr. Nashville, TN 37214

METHOD OF TRANSPORTATION TO DESTINATION: Bus to/from airport & at venue, airplane

METHOD OF TRANSPORTATION WHILE AT DESTINATION (EX. FROM AIRPORT TO HOTEL OR HOTEL TO VENUE): _____

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PURPOSE OR JUSTIFICATION FOR TRIP: HOSA International Leadership Conference

HOW MANY DAYS/PERIODS WILL STUDENTS BE ABSENT? N/A DAYS OR _____ PERIODS (615) 889-1000

ACCOMMODATIONS (Include complete address): Gaylord Opryland Resort and Convention Center - 2800 Opryland Dr. Nashville, TN 37214

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

FUNDING SOURCE FOR SUBSTITUTE TEACHERS: Perkins, CTE Funding

EXPLAIN HOW THE FOLLOWING COSTS WILL BE PAID:

TRANSPORTATION: Perkins Grant, CTE Funding

LODGING & OTHER: Club Fundraising

NUMBER OF STUDENTS PARTICIPATING: Male: 4 Female: 28 Total: 32

CERTIFICATED GROUP LEADER: Jonathan Gedalia 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: Jonathan Gedalia*, Joe Monteleone*

NAME(S) OF FEMALE SUPERVISORS: Tamara Desso*, Brenda Monteleone*, Mackenzie Marler

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.

Site administrator verification that supervisors have been cleared: _____ Date: 3/29/22

Principal (signature required): _____ Date: 3/29/22

Superintendent: _____ Date: 4/22/22

Governing Board (if required): _____ Date: _____

Revised 3/2013

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DATE OF REQUEST: 4/20/2022 SCHOOL: Rancho Pico Jr. High
GROUP: Yearbook ADVISOR/COACH: Jenny Guzman
TRIP DAYS/DATES: July 14-17, 2022 DEPARTURE TIME: _____ RETURN TIME: _____
DESTINATION: Cal Baptist University, 8432 Magnolia Avenue, Riverside, CA 92504

METHOD OF TRANSPORTATION TO DESTINATION: Parents driving their own students

METHOD OF TRANSPORTATION WHILE AT DESTINATION (EX: FROM AIRPORT TO HOTEL OR HOTEL TO VENUE):
N/A

*IF METHOD OF TRANSPORTATION IS BY BUS, CHECK THE FOLLOWING SCHOOL BUS CHARTER BUS

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PURPOSE OR JUSTIFICATION FOR TRIP: Yearbook Workshop - learn skills and begin work on next year's book

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

ACCOMMODATIONS (Include complete address): 8432 Magnolia Avenue, Riverside, CA 92504 (Cal Baptist University)

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:
N/A

TRANSPORTATION: N/A

LODGING & OTHER: Yearbook Funds

NUMBER OF STUDENTS PARTICIPATING: Male: _____ Female: 3 Total: 3

CERTIFICATED GROUP LEADER: Jenny Guzman CELL PHONE: _____

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NAME(S) OF MALE SUPERVISORS: _____

NAME(S) OF FEMALE SUPERVISORS: Jenny Guzman*

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.

Site administrator verification that supervisors have been cleared: [Signature] Date: 4/20/2022

Principal (signature required): Catherine Nicholas Date: 4/20/2022

Superintendent: [Signature] Date: 4/22/22

Governing Board (if required): _____ Date: _____

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DATE OF REQUEST: April 20, 2022 SCHOOL: Rancho Pico Jr. High
GROUP: ASB Executive Board ADVISOR/COACH: AnnaBeth Carpenter
TRIP DAYS/DATES: July 18-20, 2022 DEPARTURE TIME: _____ RETURN TIME: _____
DESTINATION: UC Santa Barbara
METHOD OF TRANSPORTATION TO DESTINATION: Parents will transport own student
METHOD OF TRANSPORTATION WHILE AT DESTINATION (EX: FROM AIRPORT TO HOTEL OR HOTEL TO VENUE):
N/A

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PURPOSE OR JUSTIFICATION FOR TRIP: Attend student leadership conference hosted by CADA & CASL
HOW MANY DAYS/PERIODS WILL STUDENTS BE ABSENT? 0 DAYS OR _____ PERIODS
ACCOMMODATIONS (Include complete address): UC Santa Barbara, 552 University Road, Santa Barbara, CA 93106
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: N/A
LODGING & OTHER: ASB Funds

NUMBER OF STUDENTS PARTICIPATING: Male: 2 Female: 3 Total: 5

CERTIFICATED GROUP LEADER: AnnaBeth Carpenter 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: Ron Ippolito * ✓

NAME(S) OF FEMALE SUPERVISORS: AnnaBeth Carpenter * ✓

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Site administrator verification that supervisors have been cleared: _____ Date: 4/20/2022
Principal (signature required): Catherine Nicholas Date: 4/20/2022
Superintendent: [Signature] Date: 4/22/22
Governing Board (if required): _____ Date: _____