

WCCUSD STUDY TRIP REQUEST FORM (Form must be typed or print clearly)

SCHOOL: Stewart School	Date of Submission: 1/5/2016
-------------------------------	-------------------------------------

TYPE OF TRIP:

OVERNIGHT TRIP

Submissions must be received in the Executive Director's office by the following timeline:

<input type="checkbox"/> Chartered Transportation	(Bus reserved by school/PTA/Transportation Office)	25 school days prior to trip date
<input type="checkbox"/> Automobile	(Driving to destination)	25 school days prior to trip date
<input checked="" type="checkbox"/> Public Transportation	(Plane, Amtrak, etc.)	25 school days prior to trip date
<input type="checkbox"/> Out of Country/state	(Plane, Amtrak, Automobile, etc.)	45 school days prior to trip date

ALL trips must start AND end at the school site.

TRIP AND CHAPERONE INFORMATION:

Minimum of 2 Chaperones, a female and a male per study trip

Adult to Student Ratio: Pre-School (1:3), K-3 (1:5) & 4-12 (1:10)

Day: Date of Trip: 5/28-6/4	Leave Time: 10:30 am Return at site time: 7:44 pm	Grade/Group: 6,7,8	Total number of students participating: 44
Trip Destination: (Include full address/phone) Washington DC (See Itinerary)	Teacher in Charge of Group: (Name, cell phone, e-mail) Marilyn Romero 510-912-1207 mromero@wccusd.net	Other Teachers Accompanying Group: Kristyn Loy Tim Shaw	
Total Number of Chaperones including teachers accompanying the group 5		<input checked="" type="checkbox"/> Chaperone form and copy of badges attached	
<input type="checkbox"/> List of student names attached-District provides insurance coverage for all students. (PowerSchool printout or typed list)			

TRANSPORTATION ARRANGEMENTS:

Chartered Transportation	CHARTERED TRANSPORTATION REQUEST FORM. All requests using district funds must be booked through the Transportation Office. Completed Chartered Transportation request must be attached to study trip request.	<input type="checkbox"/> Completed form attached. (Funding Source Account Code provided on form)
	FUNDING SOURCE Requests using other funding sources (i.e. PTA) must be booked by trip organizer and paid for at the site level. Funding source MUST be indicated.	FUNDING SOURCE/ACCOUNT CODE Parent Donations
	COMPANY Must be from District approved list as indicated on Bulletin. <u>Attach confirmation from chartered transportation company.</u>	COMPANY NAME AND CONTACT:
Automobile	AUTOMOBILE TRANSPORTATION FORM Form must be completed with driver's information attached. Valid California Driver's license and insurance requirements are mandatory.	<input type="checkbox"/> Completed form attached. <input type="checkbox"/> Valid driver's license and insurance attached
Public Transportation	TYPE OF PUBLIC TRANSPORTATION (BART, BUS, AMTRAK, FERRY) Funding source required if transportation tickets/arrangements are to be purchased using District funds. Funding source MUST be indicated even if using other funding, i.e., PTA, Approved Fundraiser, etc. PR's should be initiated at least 8 weeks in advance of the trip.	Funding Source Account Code: MUNIS Req/PO # Parent Donations
Admission Fees	FEES TO DESTINATION, I.E., ZOO, THEATER, MUSEUM, ETC. Funding source required if tickets are to be purchased using District funds. Funding source MUST be indicated even if using other funding, i.e., PTA, Approved Fundraiser, etc. PR's should be initiated at least 8 weeks in advance of the trip.	Funding Source Account Code: MUNIS Req/PO # Parent Donations

EDUCATIONAL VALUE

Must include standards reference number and a brief explanation of how the trip relates to the classroom activity. Attach additional sheet if necessary.
Standards Number(s): **8.10 Students analyze the multiple cause, key events and complex consequences of the civil war.**
8.12 Students analyze the transformation of the American economy and the changing social/political conditions in response to industrial Revolution. 8.3 Students understand the foundation of the American, political system. 7.11 Students analyze political economic change

Substitute(s) Requested	FOR SECONDARY SITES ONLY: SUBSTITUTES NEEDED FOR TEACHERS ON STUDY TRIPS.	Funding Source Account Code: Parent Donations Substitutes Needed for _____ paid periods
-------------------------	------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------

LAST DATE FOR SUBMISSION OF STUDY TRIP: April 22, 2016 (4th Friday in April)
LAST DATE FOR STUDY TRIP TO BE TAKEN: MAY 27, 2016 (4th Friday in May)

* No late or incomplete requests will be accepted. Study trips need pre-approval during CST testing periods.

STUDY TRIP REQUEST FORM MUST HAVE PRINCIPAL SIGNATURE AND FUNDING SOURCE INDICATED BEFORE SENDING TO THE EXECUTIVE DIRECTOR'S OFFICE. INCOMPLETE STUDY TRIP REQUESTS WILL BE RETURNED AND MAY RESULT IN DELAY IN PROCESSING OR DENIAL OF REQUEST. APPROVALS WILL BE SENT BACK VIA EMAIL TO SECRETARY/OFFICE MANAGER AND PRINCIPAL.

APPROVALS:

Principal Signature

Date

Funding Authorization Dept.

Signature

Date

Executive Director

Date

EXECUTIVE DIRECTOR OFFICE USE ONLY:

Received:

Approval Sent:

Date: **Executive Director**
WCCUSD By: _____