

# South Pasadena Unified School District

## Board Approved Trips: Overnight, Out-of-State, Airplane, Special Conditions

*Instructions: Use this form when an instructional /athletic trip needs to be Board approved - trips which involve staying overnight, going out of state, being transported by airplane, or other special conditions not usually seen in daily trips.*

Organization/Group SkillsUSA School SPHS Grade 9-12

Teacher/Requestor Sandra Matson-Fennell (Print) Date of Trip 6/20/16 Day Mon-Sat

DESTINATION: Horseshoe Southern Indiana, 11999 Casino Center Drive, Elizabeth, In 47117

### PLEASE STATE INSTRUCTIONAL STANDARDS AND/OR PURPOSE OF TRIP

SkillsUSA National Leadership and Skills Competition, Louisville, Kentucky

Teacher Substitute Required (List Dates Needed) 6/20-6/24

### TRANSPORTATION BY

Bus \_\_\_\_\_ Car ☒ Airplane ☒ Other (Specify) \_\_\_\_\_

Bus Company \_\_\_\_\_ No. of Buses \_\_\_\_\_ Est. Number of Miles 50.6 rt

Contact Person \_\_\_\_\_ Phone \_\_\_\_\_

Number of: Students 16 Staff 3 Parents/Volunteers \_\_\_\_\_ Total # Passengers 19

Account Name Perkins Account # /Group to be billed \_\_\_\_\_ Total Cost/student \$1100.00

SkillsUSA 230-487-00  
CTE 010-96352.0-71100-1000-  
5226-2020230

Names of Teacher(s) Other Adult(s) Accompanying Students	Title	Print on File	Over 21 yrs. Old
1 Sandra Matson-Fennell	Title: <u>CTE TEACHER</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2 Garrett Schorr	Title: <u>TEACHER</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3 Cathy Mason or Mike Hogan	Title: <u>CTE TEACHERS</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
4 _____	Title: _____	<input type="checkbox"/>	<input type="checkbox"/>

(Attach additional listing of chaperones if necessary.)

(check box)

### TIME SCHEDULE

Bus Arrival at Site tba am/pm, Departure from Site tba am/pm, Destination Arrival \_\_\_\_\_ am/pm

Departure from Destination tba am/pm, Return time to Site tba am/pm

### PICK-UP AND DELIVERY POINTS

Pick-Up/School SPHS Specific Address Diamond Avenue in front of gym

Unloading Location LAX Specific Address 1 World Way, Los Angeles, California

Stopping for meals Yes \_\_\_\_\_ No ☒ Lunch provided by Food Service \_\_\_\_\_ Student \_\_\_\_\_

### APPROVAL

Teacher/Requestor Approval Sandra Matson-Fennell Date 4/11/16

Principal Approval Janet Wicks Date 4/11/16

Authorization/ Approval Cara CNA (Assistant Superintendent of Instruction) Date 4/14/16

Board Approval \_\_\_\_\_ Superintendent's Signature \_\_\_\_\_ Date \_\_\_\_\_  
(Date)

Distribution Copies to: Originator (Teacher), Site Secretary, Food Services, AP Technician (if bus ordered)

**FORM 2**  
Rev 12/2008

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Special Conditions

ADDENDUM

SPUSD Staff Person in Charge: Sandra Matson-Fennell

Staff Person's Direct Phone Number X2613

*Please answer the following questions and forward along with the original SPUSD Board Approved Trips, FORM 2*

1. In accordance with Education Code 35331, all persons on the field trip have accident/medical insurance coverage. Check one: YES<sup>X</sup> \_\_\_\_\_ NO \_\_\_\_\_

2. Has this trip been taken before in SPUSD? Check one: YES<sup>X</sup> \_\_\_\_\_ NO \_\_\_\_\_

3. If substitutes are required, which resource will cover costs?

SPEF

4. What arrangements have been made for students to makeup any homework and/or assessments? If n/a, please indicate reason.

This trip is during summer

5. What arrangements have been made for students who cannot afford the trip's costs?

PIASC grants, Principal's grant, fundraising, Chapter Funds

6. What is the contact information for the accommodations, e.g. hotel, university, camp, etc.?

Name of sleeping location: Horseshoe Southern Indiana

Phone number: (866) 676-7463

APPROVALS

Teacher/Requestor: Sandra Matson-Fennell

Date: 4/11/14

Principal: Garet Wickman

Date: 4/11/16

Asst. Supt. of Instruction: C. A.

Date: 4/14/16

Superintendent: \_\_\_\_\_

Date: \_\_\_\_\_