

MILPITAS UNIFIED SCHOOL DISTRICT

OP-40

APPLICATION FOR FIELD TRIP APPROVAL

Submit to Purchasing/Contracts Office at least 4 weeks before the field trip

(ALL QUESTIONS MUST BE COMPLETED OR FORM WILL BE RETURNED)

SCHOOL: Curtner

DATE REQUEST SUBMITTED: 8/18/16

PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: 5th grade team

DATE OF FIELD TRIP: 11/4/16 DATE OF RETURN: 11/4/16

TIME OF DEPARTURE: 8:45 am PERIODS (Circle): 1 2 3 4 5 6 7 All Day TIME OF RETURN: 2:30 pm

DESTINATION (include address): 55 Music Concourse Dr. San Francisco 94118

DISTANCE FROM SCHOOL SITE (one way): 48 miles

TOTAL NUMBER OF PARTICIPANTS: 134 NUMBER OF STUDENTS: 117 NUMBER OF ADULTS: 17 (4 teachers)

IF OVERNIGHT FIELD TRIP, STATE ACCOMMODATION: _____

MODE OF TRANSPORTATION (check one): Chartered Bus Private Vehicles Public Bus District Bus Walking

IF USING A CHARTERED BUS, IDENTIFY COMPANY: First Student

BUS INSURANCE VERIFIED BY ACCOUNT TECH III IT (Initial) Ins. Exp 12/31/16

IF PRIVATE VEHICLES USED, IDENTIFY DRIVERS: _____

All drivers must complete OP-81 with required documents (see pg 2 of field trip procedure for requirements). It is the responsibility of the site administrator to make sure car insurance is current; otherwise, driver will not be allowed to drive.

Check box and initial after verification: (Principal's Initial) (Purchasing/Contracts initial)

PURPOSE OF TRIP (Explain how trip relates to curriculum): The fifth grade students will be attending the Academy of Science to enforce science standards as well as the non-fiction texts we read in class

COST ANALYSIS: Transportation Cost: \$ 1,425.18 Other Fees: \$ 1,208.40 Total Cost: \$ 2,633.58

HOW WILL THIS BE PAID? PR 192 758

CHARGE TO ACCOUNT:	FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CGTR	SCH	MGMT
										0000

REQUISITION # _____ (attached) or other explanation of how fees will be paid: PTA (take from each 5th grade class) (i.e. ASB, PTA, students)

REQUESTOR'S SIGNATURE: [Signature]

PRINCIPAL'S SIGNATURE: [Signature] Approved () Not approved

Only use this section if needed:

* If a contract is required for this field trip, forward the contract with this form to the Purchasing/Contracts Office at least four (4) weeks before the trip. Date sent to Purchasing/Contracts _____

Assistant Superintendent, Business Services signature (or designee): _____

* If this is an overnight field trip, 50 miles away from the school, or a trip to San Francisco, School Board approval is required. To be included in the Board's agenda, complete paperwork must be verified by Purchasing/Contracts Office.

() Board Approved () Board Denied Superintendent Signature (or designee) _____

JT/g-5

MILPITAS UNIFIED SCHOOL DISTRICT

OP-40

APPLICATION FOR FIELD TRIP APPROVAL

Submit to Purchasing/Contracts Office at least 4 weeks before the field trip

(ALL QUESTIONS MUST BE COMPLETED OR FORM WILL BE RETURNED)

SCHOOL: Rose DATE REQUEST SUBMITTED: 8/30/2016

PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: Ms. King / Mrs. Dacy

DATE OF FIELD TRIP: 3/14 - 3/17/2017 DATE OF RETURN: 3/17/2017

TIME OF DEPARTURE: 9:00 a.m.^{3/14/17} PERIODS (Circle): 1 2 3 4 5 6 7 (All Day) TIME OF RETURN: 12:00pm ^{3/17/17}

DESTINATION (include address): Walden West - 13851 Stevens Canyon Rd
Cupertino, CA 95014

DISTANCE FROM SCHOOL SITE (one way): 21.2 miles
TOTAL NUMBER OF PARTICIPANTS: 68 NUMBER OF STUDENTS: 66 NUMBER OF ADULTS: 2

IF OVERNIGHT FIELD TRIP, STATE ACCOMMODATION: Walden West Outdoor School

MODE OF TRANSPORTATION (check one): Chartered Bus Private Vehicles Public Bus District Bus Walking

IF USING A CHARTERED BUS, IDENTIFY COMPANY: First Student

BUS INSURANCE VERIFIED BY ACCOUNT TECH III JL (initial) Ins Exp. 12/31/16

IF PRIVATE VEHICLES USED, IDENTIFY DRIVERS: _____

All drivers must complete OP-81 with required documents (see pg 2 of field trip procedure for requirements).

It is the responsibility of the site administrator to make sure car insurance is current; otherwise, driver will not be allowed to drive.

Check box and initial after verification: _____ (Principal's initial) _____ (Purchasing/Contracts initial)

PURPOSE OF TRIP (Explain how trip relates to curriculum): Walden West offers a sound environment program which is aligned with district standards

COST ANALYSIS: Transportation Cost: \$ _____ Other Fees: \$ _____ Total Cost: \$ 17,800

HOW WILL THIS BE PAID?

CHARGE TO ACCOUNT:	FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT
										0000

REQUISITION # _____ (attached) or other explanation of how fees will be paid: students (i.e. ASB, PTA, students)

REQUESTOR'S SIGNATURE: Arian King / Sybra Dacy

PRINCIPAL'S SIGNATURE: [Signature] Approved Not Approved

Only use this section if needed:

★ If a contract is required for this field trip, forward the contract with this form to the Purchasing/Contracts Office at least four (4) weeks before the trip. Date sent to Purchasing/Contracts _____

Assistant Superintendent, Business Services signature (or designee): _____

★ If this is an overnight field trip, 50 miles away from the school, or a trip to San Francisco, School Board approval is required. To be included in the Board's agenda, complete paperwork must be verified by Purchasing/Contracts Office.

() Board Approved () Board Denied Superintendent Signature (or designee) _____

JT 19-1
OP-40

MILPITAS UNIFIED SCHOOL DISTRICT
APPLICATION FOR FIELD TRIP APPROVAL

Submit to Purchasing/Contracts Office at least 4 weeks before the field trip

(ALL QUESTIONS MUST BE COMPLETED OR FORM WILL BE RETURNED)

SCHOOL: Weller Elementary DATE REQUEST SUBMITTED: 7/29/2016

PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: _____

DATE OF FIELD TRIP: May 9th, 2017 DATE OF RETURN: May 12th, 2017

TIME OF DEPARTURE: 9:00 am PERIODS (Circle): 1 2 3 4 5 6 7 All Day TIME OF RETURN: 12:00 pm

DESTINATION (include address): Walden West Outdoor School 13251 Stevens Canyon Road
Cupertino, CA 95014

DISTANCE FROM SCHOOL SITE (one way): 24.5 miles

TOTAL NUMBER OF PARTICIPANTS: 72 NUMBER OF STUDENTS: 66 NUMBER OF ADULTS: 6

IF OVERNIGHT FIELD TRIP, STATE ACCOMMODATION: Walden West Center cabins

MODE OF TRANSPORTATION (check one): Chartered Bus Private Vehicles Public Bus District Bus Walking

IF USING A CHARTERED BUS, IDENTIFY COMPANY: Fremont Unified School District (90 720310)

BUS INSURANCE VERIFIED BY ACCOUNT TECH III JT (initial) Ins. Exp 06/30/17

IF PRIVATE VEHICLES USED, IDENTIFY DRIVERS: _____

All drivers must complete OP-81 with required documents (see pg 2 of field trip procedure for requirements).

It is the responsibility of the site administrator to make sure car insurance is current; otherwise, driver will not be allowed to drive.

Check box and initial after verification: _____ (Principal's initial) _____ (Purchasing/Contracts initial)

PURPOSE OF TRIP (Explain how trip relates to curriculum): Science Curriculum - 6th grade.

COST ANALYSIS: Transportation Cost: \$ _____ Other Fees: \$ _____ Total Cost: \$ _____

HOW WILL THIS BE PAID?

CHARGE TO ACCOUNT:	FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT
	010	0000	0	5907	00	1110	1000	027002	011	0000

REQUISITION # 191291 (attached) or other explanation of how fees will be paid: _____ (i.e. ASB, PTA, students)

REQUESTOR'S SIGNATURE: _____

PRINCIPAL'S SIGNATURE: [Signature] () Approved () Not Approved

Only use this section if needed:

★ If a contract is required for this field trip, forward the contract with this form to the Purchasing/Contracts Office at least four (4) weeks before the trip. Date sent to Purchasing/Contracts _____
Assistant Superintendent, Business Services signature (or designee): _____

★ If this is an overnight field trip, 50 miles away from the school, or a trip to San Francisco, School Board approval is required. To be included in the Board's agenda, complete paperwork must be verified by Purchasing/Contracts Office.
() Board Approved () Board Denied Superintendent Signature (or designee) _____

JT/9-

MILPITAS UNIFIED SCHOOL DISTRICT

OP-40

APPLICATION FOR FIELD TRIP APPROVAL

Submit to Purchasing/Contracts Office at least 4 weeks before the field trip

(ALL QUESTIONS MUST BE COMPLETED OR FORM WILL BE RETURNED)

SCHOOL: WELLER DATE REQUEST SUBMITTED: 09/07/2016

PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: JOHN DUONG/NAOMI NEWSTROM

DATE OF FIELD TRIP: 11/09/2016 DATE OF RETURN: 11/09/2016

TIME OF DEPARTURE: 7:30AM PERIODS (Circle): 1 2 3 4 5 6 7 (All Day) TIME OF RETURN: 2:30PM

DESTINATION (include address) BLUE AND GOLD FERRY, PIER 41, SAN FRANCISCO, CA 94133

DISTANCE FROM SCHOOL SITE (one way): 53 miles

TOTAL NUMBER OF PARTICIPANTS: 77 NUMBER OF STUDENTS: 65 NUMBER OF ADULTS: 12

IF OVERNIGHT FIELD TRIP, STATE ACCOMMODATION: _____

MODE OF TRANSPORTATION (check one): Chartered Bus Private Vehicles Public Bus District Bus Walking

IF USING A CHARTERED BUS, IDENTIFY COMPANY: FUSD / PO # 720310

BUS INSURANCE VERIFIED BY ACCOUNT TECH III JT (initial) Ins. Exp 06/30/17

IF PRIVATE VEHICLES USED, IDENTIFY DRIVERS: _____

All drivers must complete OP-81 with required documents (see pg 2 of field trip procedure for requirements).
It is the responsibility of the site administrator to make sure car insurance is current; otherwise, driver will not be allowed to drive.

Check box and initial after verification: _____ (Principal's initial) _____ (Purchasing/Contracts initial)

PURPOSE OF TRIP (Explain how trip relates to curriculum) STUDENTS LEARNED ABOUT PUSH/PULL, voluntary
immigration. They have studied why people move to the us and
more specifically, California.

COST ANALYSIS: Transportation Cost: \$ 972 Other Fees: \$ 894 Total Cost: \$ 1,866

HOW WILL THIS BE PAID? Family Donation

CHARGE TO ACCOUNT:	FD	RES	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT
	010	0000	0	5807	00	1110	1000	027002	011 0000

REQUISITION # OPEN P.O. (attached) or other explanation of how fees will be paid: _____ (i.e. ASB, PTA, students)

REQUESTOR'S SIGNATURE: Naomi Newstrom

PRINCIPAL'S SIGNATURE: [Signature] () Approved () Not Approved

Only use this section if needed:

★ If a contract is required for this field trip, forward the contract with this form to the Purchasing/Contracts Office at least four (4) weeks before the trip. Date sent to Purchasing/Contracts _____
Assistant Superintendent, Business Services signature (or designee): _____

★ If this is an overnight field trip, 50 miles away from the school, or a trip to San Francisco, School Board approval is required. To be included in the Board's agenda, complete paperwork must be verified by Purchasing/Contracts Office.
() Board Approved () Board Denied Superintendent Signature (or designee) _____

Nancy JT/9
OP-40

MILPITAS UNIFIED SCHOOL DISTRICT
APPLICATION FOR FIELD TRIP APPROVAL
Submit to Purchasing/Contracts Office at least 4 weeks before the field trip
 (ALL QUESTIONS MUST BE COMPLETED OR FORM WILL BE RETURNED)

SCHOOL: MHS DATE REQUEST SUBMITTED: 8-16-16

PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: A. Hutchison

DATE OF FIELD TRIP: Oct 4, 2016 DATE OF RETURN: Oct 4, 2016

TIME OF DEPARTURE: 8 AM PERIODS (Circle): 1 2 3 4 5 6 7 All Day TIME OF RETURN: 3 PM

DESTINATION (include address): Academy of Art University, De Young Museum
79 New Montgomery, SF, CA 94105

DISTANCE FROM SCHOOL SITE (one way): _____ miles

TOTAL NUMBER OF PARTICIPANTS: 52 NUMBER OF STUDENTS: 50 NUMBER OF ADULTS: 2

IF OVERNIGHT FIELD TRIP, STATE ACCOMMODATION: N/A

MODE OF TRANSPORTATION (check one): Chartered Bus Private Vehicles Public Bus District Bus Walking
 MILPITAS USD

IF USING A CHARTERED BUS, IDENTIFY COMPANY: CAMPBELL

BUS INSURANCE VERIFIED BY ACCOUNT TECH III JT (initial) FMS EXP 07/01/17 SEP - 7 2016

IF PRIVATE VEHICLES USED, IDENTIFY DRIVERS: N/A

All drivers must complete OP-81 with required documents (see pg 2 of field trip procedure for requirements). EDUCATIONAL SERVICES
It is the responsibility of the site administrator to make sure car insurance is current; otherwise, driver will not be allowed to drive.

Check box and initial after verification: (Principal's initial) (Purchasing/Contracts initial)

PURPOSE OF TRIP (Explain how trip relates to curriculum):
college tour & curriculum enhancement

COST ANALYSIS: Transportation Cost: \$ 1000 Other Fees: \$ — Total Cost: \$ 1000

HOW WILL THIS BE PAID?

CHARGE TO ACCOUNT:	FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT
	060	3550	0	5807	00	3800	1000	3550-00	041	0000

REQUISITION # 192328 (attached) or other explanation of how fees will be paid: _____ (i.e. ASB, PTA, students)

REQUESTOR'S SIGNATURE: [Signature]

PRINCIPAL'S SIGNATURE: [Signature] (X) Approved () Not approved

Only use this section if needed:

★ If a contract is required for this field trip, forward the contract with this form to the Purchasing/Contracts Office at least four (4) weeks before the trip. Date sent to Purchasing/Contracts _____

Assistant Superintendent, Business Services signature (or designee): _____

★ If this is an overnight field trip, 50 miles away from the school, or a trip to San Francisco, School Board approval is required. To be included in the Board's agenda, complete paperwork must be verified by Purchasing/Contracts Office.

() Board Approved () Board Denied Superintendent Signature (or designee) _____

SHIPD SEP 7 - 2016

JT/9-

MILPITAS UNIFIED SCHOOL DISTRICT

OP-40

APPLICATION FOR FIELD TRIP APPROVAL

Submit to Purchasing/Contracts Office at least 4 weeks before the field trip

(ALL QUESTIONS MUST BE COMPLETED OR FORM WILL BE RETURNED)

SCHOOL: MILPITAS HIGH SCHOOL DATE REQUEST SUBMITTED: 9-2-16

PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: A Hutchison, Digital Business Academy

DATE OF FIELD TRIP: February 7, 2017 DATE OF RETURN: February 7, 2017

TIME OF DEPARTURE: 8 AM PERIODS (Circle): 1 2 3 4 5 6 7 (All Day) TIME OF RETURN: 3 PM

DESTINATION (include address): Walt Denny Museum, 104 Montgomery St, SF CA 94129

DISTANCE FROM SCHOOL SITE (one way): 51 miles miles

TOTAL NUMBER OF PARTICIPANTS: 50 NUMBER OF STUDENTS: 48 NUMBER OF ADULTS: 2

IF OVERNIGHT FIELD TRIP, STATE ACCOMMODATION: N/A

MODE OF TRANSPORTATION (check one): Chartered Bus Private Vehicles Public Bus District Bus Walking

IF USING A CHARTERED BUS, IDENTIFY COMPANY: CAMPBELL

RECEIVED
MILPITAS USD
SEP - 6 2016

BUS INSURANCE VERIFIED BY ACCOUNT TECH III JT (Initial) Ins Exp 07/01/17

IF PRIVATE VEHICLES USED, IDENTIFY DRIVERS: N/A

All drivers must complete OP-81 with required documents (see pg 2 of field trip procedure for requirements).

It is the responsibility of the site administrator to make sure car insurance is current; otherwise, driver will not be allowed to drive SERVICES

Check box and initial after verification: (Principal's initial) (Purchasing/Contracts initial)

PURPOSE OF TRIP (Explain how trip relates to curriculum):
MUSEUM TOUR for DIGITAL ART STUDENTS

COST ANALYSIS: Transportation Cost: \$ 1000 900 est Other Fees: \$ --- Total Cost: \$ 1000
PR 192641

HOW WILL THIS BE PAID?

CHARGE TO ACCOUNT:	FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT
	060	7220	0	5807	00	1110	1000	7220-03	041	0000

REQUISITION # 192641 (attached) or other explanation of how fees will be paid: _____ (i.e. ASB, PTA, students)

REQUESTOR'S SIGNATURE: [Signature]

PRINCIPAL'S SIGNATURE: [Signature] Approved () Not approved

Only use this section if needed:

★ If a contract is required for this field trip, forward the contract with this form to the Purchasing/Contracts Office at least four (4) weeks before the trip. Date sent to Purchasing/Contracts _____

Assistant Superintendent, Business Services signature (or designee): _____

★ If this is an overnight field trip, 50 miles away from the school, or a trip to San Francisco, School Board approval is required. To be included in the Board's agenda, complete paperwork must be verified by Purchasing/Contracts Office.

() Board Approved () Board Denied Superintendent Signature (or designee) _____

JT/9-

MILPITAS UNIFIED SCHOOL DISTRICT

OP-40

APPLICATION FOR FIELD TRIP APPROVAL

Submit to Purchasing/Contracts Office at least 4 weeks before the field trip

(ALL QUESTIONS MUST BE COMPLETED OR FORM WILL BE RETURNED)

SCHOOL: MILPITAS HIGH SCHOOL DATE REQUEST SUBMITTED: 9-2-16

PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: A Hutchison, Digital Business Academy

DATE OF FIELD TRIP: February 7, 2017 DATE OF RETURN: February 7, 2017

TIME OF DEPARTURE: 8 AM PERIODS (Circle): 1 2 3 4 5 6 7 (All Day) TIME OF RETURN: 3 PM

DESTINATION (include address): Walt Denny Museum, 104 Montgomery St, SF CA 94129

DISTANCE FROM SCHOOL SITE (one way): 51 miles

TOTAL NUMBER OF PARTICIPANTS: 50 NUMBER OF STUDENTS: 48 NUMBER OF ADULTS: 2

IF OVERNIGHT FIELD TRIP, STATE ACCOMMODATION: N/A

MODE OF TRANSPORTATION (check one): Chartered Bus [X] Private Vehicles [] Public Bus [] District Bus [] Walking []

IF USING A CHARTERED BUS, IDENTIFY COMPANY: CAMPBELL RECEIVED MILPITAS USD

BUS INSURANCE VERIFIED BY ACCOUNT TECH III [X] JT (Initial) Ins Exp 07/01/17 SEP - 6 2016

IF PRIVATE VEHICLES USED, IDENTIFY DRIVERS: N/A

All drivers must complete OP-81 with required documents (see pg 2 of field trip procedure for requirements). It is the responsibility of the site administrator to make sure car insurance is current; otherwise, driver will not be allowed to drive. SERVICES

Check box and initial after verification: [] (Principal's initial) [] (Purchasing/Contracts initial)

PURPOSE OF TRIP (Explain how trip relates to curriculum): MUSEUM TOUR FOR DIGITAL ART STUDENTS

COST ANALYSIS: Transportation Cost: \$ 9000.00 PR 192641 Other Fees: \$ Total Cost: \$ 9000.00

HOW WILL THIS BE PAID?

Table with columns: CHARGE TO ACCOUNT, FD, RES, Y, OBJ, SOBJ, GOAL, FUNC, CCTR, SCH, MGMT. Values: 060, 7220, 0, 5807, 00, 1110, 1000, 7220-03, 041, 0000

REQUISITION # 192641 (attached) or other explanation of how fees will be paid: (i.e. ASB, PTA, students)

REQUESTOR'S SIGNATURE: [Signature]

PRINCIPAL'S SIGNATURE: [Signature] Approved () Not approved

Only use this section if needed:

★ If a contract is required for this field trip, forward the contract with this form to the Purchasing/Contracts Office at least four (4) weeks before the trip. Date sent to Purchasing/Contracts

Assistant Superintendent, Business Services signature (or designee):

★ If this is an overnight field trip, 50 miles away from the school, or a trip to San Francisco, School Board approval is required. To be included in the Board's agenda, complete paperwork must be verified by Purchasing/Contracts Office.

() Board Approved () Board Denied Superintendent Signature (or designee)

MILPITAS UNIFIED SCHOOL DISTRICT

OP-40

APPLICATION FOR FIELD TRIP APPROVAL

Submit to Purchasing/Contracts Office at least 4 weeks before the field trip

(ALL QUESTIONS MUST BE COMPLETED OR FORM WILL BE RETURNED)

SCHOOL: Milpitas DATE REQUEST SUBMITTED: 8/16/16

PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: DBA

DATE OF FIELD TRIP: 1/12/2017 Thursday DATE OF RETURN: 1/12/17

TIME OF DEPARTURE: 8:00 AM PERIODS (Circle): 1 2 3 4 5 6 7 All Day TIME OF RETURN: 3:00 PM

DESTINATION (include address): piw 17 Suite 100 San Francisco (EXPLORATORIUM)

DISTANCE FROM SCHOOL SITE (one way): 52 miles

TOTAL NUMBER OF PARTICIPANTS: 40 NUMBER OF STUDENTS: 36 NUMBER OF ADULTS: 4

IF OVERNIGHT FIELD TRIP, STATE ACCOMMODATION: N/A

MODE OF TRANSPORTATION (check one): Chartered Bus Private Vehicles Public Bus District Bus Walking

IF USING A CHARTERED BUS, IDENTIFY COMPANY: CAMPBELL

BUS INSURANCE VERIFIED BY ACCOUNT TECH III JT (Initial) Ins Exp 07/01/17 SEP - 6 2016

IF PRIVATE VEHICLES USED, IDENTIFY DRIVERS: N/A

All drivers must complete OP-81 with required documents (see pg 2 of field trip procedure for requirements). It is the responsibility of the site administrator to make sure car insurance is current; otherwise, driver will not be allowed to drive.

Check box and initial after verification: (Principal's Initial) (Purchasing/Contracts Initial)

PURPOSE OF TRIP (Explain how trip relates to curriculum): CTE Technology Curriculum Enhancement - student engagement

COST ANALYSIS: Transportation Cost: \$ PR192331 Other Fees: \$ _____ Total Cost: \$ _____

HOW WILL THIS BE PAID?

CHARGE TO ACCOUNT:	FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT
	060	7220	0	5807	00	1110	1000	722003	041	0000

REQUISITION # 192331 (attached) or other explanation of how fees will be paid: _____ (i.e. ASB, PTA, students)

REQUESTOR'S SIGNATURE: [Signature]

PRINCIPAL'S SIGNATURE: [Signature] Approved () Not approved

Only use this section if needed:

* If a contract is required for this field trip, forward the contract with this form to the Purchasing/Contracts Office at least four (4) weeks before the trip. Date sent to Purchasing/Contracts _____

Assistant Superintendent, Business Services signature (or designee): _____

* If this is an overnight field trip, 50 miles away from the school, or a trip to San Francisco, School Board approval is required. To be included in the Board's agenda, complete paperwork must be verified by Purchasing/Contracts Office.

() Board Approved () Board Denied Superintendent Signature (or designee) _____

JT/9-1

Nancy
RECEIVED
OP-40
MILPITAS USD

MILPITAS UNIFIED SCHOOL DISTRICT
APPLICATION FOR FIELD TRIP APPROVAL

Submit to Purchasing/Contracts Office at least 4 weeks before the field trip
(ALL QUESTIONS MUST BE COMPLETED OR FORM WILL BE RETURNED)

SEP 15 2016

SCHOOL: MHS

DATE REQUEST SUBMITTED: 9/7/16
EDUCATIONAL SERVICES

PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: AOTT/Brounstein

DATE OF FIELD TRIP: 10/4/16 DATE OF RETURN: 10/4/16

TIME OF DEPARTURE: 8:00 PERIODS (Circle): 1 2 3 4 5 6 7 All Day TIME OF RETURN: 3:00

DESTINATION (include address): SFSU-1600 Holloway Ave, SF, CA 94132

DISTANCE FROM SCHOOL SITE (one way): 45 miles

TOTAL NUMBER OF PARTICIPANTS: 63 NUMBER OF STUDENTS: 61 NUMBER OF ADULTS: 2

IF OVERNIGHT FIELD TRIP, STATE ACCOMMODATION: _____

MODE OF TRANSPORTATION (check one): Chartered Bus Private Vehicles Public Bus District Bus Walking

IF USING A CHARTERED BUS, IDENTIFY COMPANY: First Student

BUS INSURANCE VERIFIED BY ACCOUNT TECH III JT (Initial) Ins. Exp 12/31/16

IF PRIVATE VEHICLES USED, IDENTIFY DRIVERS: _____

All drivers must complete OP-81 with required documents (see pg 2 of field trip procedure for requirements).
It is the responsibility of the site administrator to make sure car insurance is current; otherwise, driver will not be allowed to drive.

Check box and initial after verification: _____ (Principal's initial) _____ (Purchasing/Contracts Initial)

PURPOSE OF TRIP (Explain how trip relates to curriculum): College visit for academy students

COST ANALYSIS: Transportation Cost: \$ 683.00 Other ^{Sub} Fees: \$ 100 Total Cost: \$ 785.00

HOW WILL THIS BE PAID?

CHARGE TO ACCOUNT:	FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT
	060	7220	0	5807	00	1110	1000	722001	091	0000

REQUISITION # 190431 (attached) or other explanation of how fees will be paid: _____ (i.e. ASB, PTA, students)

REQUESTOR'S SIGNATURE: [Signature] Brounstein x 4185

PRINCIPAL'S SIGNATURE: [Signature] 9/14/16 Approved () Not approved

Only use this section if needed:

★ If a contract is required for this field trip, forward the contract with this form to the Purchasing/Contracts Office at least four (4) weeks before the trip. Date sent to Purchasing/Contracts _____

Assistant Superintendent, Business Services signature (or designee): _____

★ If this is an overnight field trip, 50 miles away from the school, or a trip to San Francisco, School Board approval is required. To be included in the Board's agenda, complete paperwork must be verified by Purchasing/Contracts Office.

() Board Approved () Board Denied Superintendent Signature (or designee) _____

SHIPPED SEP 15 2016