

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: September 27, 2016

PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: Milpitas Speech and Debate

DATE OF FIELD TRIP: November 4, 2016 DATE OF RETURN: November 8, 2016

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

DESTINATION (include address): Notre Dame High School (13645 Riverside Dr, Sherman Oaks, CA, 91423)

DISTANCE FROM SCHOOL SITE (one way): 336 miles

TOTAL NUMBER OF PARTICIPANTS: 5 NUMBER OF STUDENTS: 4 NUMBER OF ADULTS: 1

IF OVERNIGHT FIELD TRIP, STATE ACCOMMODATION: Best Western Plus Carriage Inn (5525 Sepulveda Blvd, Sherman Oaks, CA 91423)

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

IF USING A CHARTERED BUS, IDENTIFY COMPANY:

BUS INSURANCE VERIFIED BY ACCOUNT TECH III (initial)

IF PRIVATE VEHICLES USED, IDENTIFY DRIVERS: Suzanne Marple

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) JT (Purchasing/Contracts initial) INC. EXP 1/18/17

PURPOSE OF TRIP (Explain how trip relates to curriculum): Students will be competing in policy debate at the Damus Hollywood Invitational and USC Round Robin.

COST ANALYSIS: Transportation Cost: \$ Other Fees: \$ registration \$ 125 Total Cost: \$ 1,055 hotel = \$ 155 / night

HOW WILL THIS BE PAID? Parents

Table with columns: CHARGE TO ACCOUNT, FD, RES, Y, OBJ, SOBJ, GOAL, FUNC, CCTR, SCH, MGMT. Values include 010, 0000, 0, 1151, 00, 1110, 1000, 093400, 0000.

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

REQUESTOR'S SIGNATURE:

PRINCIPAL'S 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):

JT/16-

MILPITAS UNIFIED SCHOOL DISTRICT

OP-40

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

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

SCHOOL: Burnett DATE REQUEST SUBMITTED: 8/31/2016

PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: 4th grade

DATE OF FIELD TRIP: Nov 3 DATE OF RETURN: Nov 3

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

DESTINATION (include address): Monterey Bay Aquarium 886 Cannery Row Monterey

DISTANCE FROM SCHOOL SITE (one way): 79 miles

TOTAL NUMBER OF PARTICIPANTS: 115 NUMBER OF STUDENTS: 90 NUMBER OF ADULTS: 25

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: Royal Coach Tours

BUS INSURANCE VERIFIED BY ACCOUNT TECH III JT (initial) Ins. Exp 02/01/17

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): To support science NGSS standards that animal structures adapt for survival of species

COST ANALYSIS: Transportation Cost: \$ 2358.50 Other Fees: \$ — Total Cost: \$ 2358.50

HOW WILL THIS BE PAID? 190945 PRINCIPAL'S ACCT.

CHARGE TO ACCOUNT:	FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT
	010	0000	00	5982	00	1110	1000	027002	014	0000

REQUISITION # _____ (attached) 5807 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: Curtner DATE REQUEST SUBMITTED: 10-11-16

PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: All 4th grade classes

DATE OF FIELD TRIP: 3-22-17 DATE OF RETURN: 3-22-17

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

DESTINATION (include address): Mission San Juan Bautista 408 2nd st, San Juan Bautista, CA 95045

DISTANCE FROM SCHOOL SITE (one way): 53 miles

TOTAL NUMBER OF PARTICIPANTS: 122 NUMBER OF STUDENTS: 104 NUMBER OF ADULTS: 18

IS OVERNIGHT FIELD TRIP, STATE ACCOMMODATION:

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

IF USING A CHARTERED BUS, IDENTIFY COMPANY: First Student

INSURANCE VERIFIED BY ACCOUNT TECH III [X] 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).

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 will see how the people who occupied the presidios, missions, ranchos and pueblos lived. CA Standard

COST ANALYSIS: Transportation Cost: \$ 1,152.12 Other Fees: \$ 150.00 Total Cost: \$ 1,302.12

HOW WILL THIS BE PAID?

Table with columns: CHARGE TO ACCOUNT, FD, RES, Y, OBJ, SOBJ, GOAL, FUNC, CCTR, SCH, MGMT. Value 0000 in MGMT column.

REQUISITION # (attached) or other explanation of how fees will be paid: PTA (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: Pomeroy DATE REQUEST SUBMITTED: 9-22-16
 PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: Rms 3, 4, 12, 13
 DATE OF FIELD TRIP: March 29, 2017 DATE OF RETURN: March 29, 2017
 TIME OF DEPARTURE: 8:00 PERIODS (Circle): 1 2 3 4 5 6 7 All Day TIME OF RETURN: 4:00
 DESTINATION (include address): Monterey Bay Aquarium
 DISTANCE FROM SCHOOL SITE (one way): 79 miles ✓
 TOTAL NUMBER OF PARTICIPANTS: 124 NUMBER OF STUDENTS: 100 NUMBER OF ADULTS: 24

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: Michael's

BUS INSURANCE VERIFIED BY ACCOUNT TECH III JT (initial) Inv Exp 09/15/17

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): To learn about ocean animals and habitats.

COST ANALYSIS: Transportation Cost: \$ 2439.50 Other Fees: \$ 60.00 Total Cost: \$ 2499.50

HOW WILL THIS BE PAID?

CHARGE TO ACCOUNT:	FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT
	010	0000	0	5807	00	1110	1000	0270-02	018	0000

REQUISITION # 191389* (attached) or other explanation of how fees will be paid: _____ (i.e. ASB, PTA, students)

REQUESTOR'S SIGNATURE: Austa Falcone

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: MHS DATE REQUEST SUBMITTED: 10-4-16

PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: Schletzbaum / MHS Speech Debate

DATE OF FIELD TRIP: Nov 4 DATE OF RETURN: Nov 7

TIME OF DEPARTURE: 5 PM PERIODS (Circle) 9-7 TIME OF RETURN: 9 PM

DESTINATION (include address): Notre Dame 13645 Riverside, Sherman Oaks CA 91423

DISTANCE FROM SCHOOL SITE (one way): 336 miles

TOTAL NUMBER OF PARTICIPANTS: 5 NUMBER OF STUDENTS: 4 NUMBER OF ADULTS: 1

IF OVERNIGHT FIELD TRIP, STATE ACCOMMODATION: Maniot Courtyard 15433 Ventura Blvd Sherman Oaks CA 91403

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

IF USING A CHARTERED BUS, IDENTIFY COMPANY: _____

BUS INSURANCE VERIFIED BY ACCOUNT TECH III _____ (Initial)

IF PRIVATE VEHICLES USED, IDENTIFY DRIVERS: Charles Schletzbaum OP 81 on file

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) JT (Purchasing/Contracts Initial) Ins. Exp 12/5/16

PURPOSE OF TRIP (Explain how trip relates to curriculum): Under of Southern California Debate Tournament

COST ANALYSIS: Transportation Cost: \$ 200 Other Fees: \$ 700 Total Cost: \$ 1060

HOW WILL THIS BE PAID?

CHARGE TO ACCOUNT:	FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT
	010	0000	0	1151	00	110	1000			0000

REQUISITION # _____ (attached) or other explanation of how fees will be paid: ASB 230 / Parent's (i.e. ASB, PTA, students)

REQUESTOR'S SIGNATURE: Charles Schletzbaum X-3903

PRINCIPAL'S 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) _____

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: 10-14-16

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

DATE OF FIELD TRIP: 11/3/16 DATE OF RETURN: 11/3/16

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

DESTINATION (include address): SFS State 600 Holloway Ave SF 94132;

DISTANCE FROM SCHOOL SITE (one way): USF 2130 Fulton St 94117; Pier 39 Beach St / Embarcad
45 miles miles

TOTAL NUMBER OF PARTICIPANTS: 54 NUMBER OF STUDENTS: 50 NUMBER OF ADULTS: 4

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: ~~Della Charter Bus~~ Santa Clara

BUS INSURANCE VERIFIED BY ACCOUNT TECH III _____ (initial) Unified Transportati

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): _____

AVIO college tour Freshmen & Sophomores

COST ANALYSIS: Transportation Cost: \$ 877.40 Other Fees: \$ 320 Total Cost: \$ 1197.40

HOW WILL THIS BE PAID?

CHARGE TO ACCOUNT:	FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT
	010	0000	0	5807	00	110	1000	709100	041	0000

REQUISITION # 192922 (attached) or other explanation of how fees will be paid: _____ (i.e. ASB, PTA, students)

REQUESTOR'S SIGNATURE: [Signature] X-4022

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 before the trip. Date sent to Purchasing/Contracts _____ Bus insurance needed
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 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) _____

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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: 9-26-16

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

DATE OF FIELD TRIP: 11/10/16 DATE OF RETURN: 11/10/16

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

DESTINATION (include address): Hornet Athletic Center 6000 J St. Sacramento, CA

DISTANCE FROM SCHOOL SITE (one way): 81 miles 95819

TOTAL NUMBER OF PARTICIPANTS: 58 NUMBER OF STUDENTS: 56 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~~ Santa Clara USD

BUS INSURANCE VERIFIED BY ACCOUNT TECH III _____ (initial)

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): AVID College Tour

COST ANALYSIS: Transportation Cost: \$1,411.74 Other Fees: \$ 320.00 Total Cost: 1,731.74

HOW WILL THIS BE PAID?

CHARGE TO ACCOUNT:	FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT
	010	0000	0	5807	00	1110	1000	709100	041	0000

REQUISITION # 192915 (attached) or other explanation of how fees will be paid: _____ (i.e. ASB, PTA, students)

REQUESTOR'S SIGNATURE: [Signature] (ext 4009) Frank Castro

PRINCIPAL'S 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 before the trip. Date sent to Purchasing/Contracts _____

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

Bus insurance needed.

* If this is an overnight field trip, 50 miles away from the school, or a trip to San Francisco, School Board approval must 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 OCT 18 2016