

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: 1 24 17

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

DATE OF FIELD TRIP: 2-16-17 DATE OF RETURN: 2-17-17

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

DESTINATION (include address): Walnut Creek Marriott 2355 N Main Walnut Creek CA

DISTANCE FROM SCHOOL SITE (one way): 39 miles

TOTAL NUMBER OF PARTICIPANTS: 3 NUMBER OF STUDENTS: 2 NUMBER OF ADULTS: 1

IF OVERNIGHT FIELD TRIP, STATE ACCOMMODATION: N/A (2 Day trips, not overnight)

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 Schletterberry

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) 01/30/17

PURPOSE OF TRIP (Explain how trip relates to curriculum): California Round Robin Tournament

COST ANALYSIS: Transportation Cost: \$ NA Other Fees: \$ Subs - 300 Entry 250 Total Cost: \$ 550

HOW WILL THIS BE PAID? (230.490)

CHARGE TO ACCOUNT:	FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT
	<u>010</u>	<u>0000</u>	<u>0</u>	<u>1151</u>	<u>00</u>	<u>1110</u>	<u>1000</u>	<u>093400</u>	<u>041</u>	<u>0000</u>

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

REQUESTOR'S SIGNATURE: \_\_\_\_\_ X-3903

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 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) \_\_\_\_\_

SHIP'D JAN 27 2017

## The College Preparatory School

*mens conscia recti*

January 21, 2017

Dear Coach:

It is with great pleasure that we invite the team of Rahul Madnawat & Brandon Schletzbaum to participate in the Seventh Annual College Preparatory School California Public Forum Round Robin. This round robin competition is a very special event, designed to provide participants with a unique educational experience. We are inviting the top high school Public Forum debaters in the nation to participate in this event, and we are pleased to include your debaters in this impressive group. You should be very proud of the accomplishments that your debaters have achieved already this year. Their success reflects well on their coaches, teachers, and entire school community. We would appreciate a decision as soon as possible, and no later than Monday, January 30, 2017.

The California Round Robin will be held in conjunction with the California Invitational at the University of California at Berkeley (February 18-20, 2017). It takes place on February 16 and 17, 2017 (with registration on the night of Wednesday, Feb. 15), immediately before the Berkeley tournament.

This round robin competition is unique, in that it uses a panel of subject area experts to evaluate the final round. All of the debaters will have a chance to meet and talk with the expert panelists during the Awards Banquet before the final round. We view this event as an opportunity for some of the nation's top high school students to interact with some of the leading experts in the field of the debate topic. Due to the special nature of the final round, we require that all round robin participants attend both the awards banquet and final debate round. If your team will not attend the final round and banquet, we request that you not accept this invitation.

The entry fee for this event is \$250. This entry fee covers one team and one coach. It includes 3 t-shirts, Thursday lunch and dinner, and the Friday awards banquet dinner. Participating debaters must provide one judge. We use two judges in all preliminary rounds. If you cannot provide a judge, we will hire one for you at a cost of \$200.

This year's competition will be held at The Marriott Walnut Creek (2355 North Main Street, Walnut Creek, California 94596, 925-934-2000). The Marriott is located about 15 miles (about 25 minutes) from the Cal campus and it is one of the official tournament hotels. It is a large convention style hotel in downtown Walnut Creek offering a highly discounted rate. Reservations can be made by calling the hotel and asking for the UC Berkeley Debate Rate. If rooms are sold out, you may also be able to book at the nearby Holiday Inn.

We are very excited about this event, and we look forward to hosting you and your students. Please let us know if you have further questions, and if there is anything we can do to help make your team's participation possible.

Sincerely,

Lexy Green ('81)  
Director of Debate

John Hines  
Assistant Director of Debate

JT/2-3-17

MILPITAS UNIFIED SCHOOL DISTRICT

OP-40 rev. July 2011

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 Randall DATE REQUEST SUBMITTED 1/23/17

PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST 2nd

DATE OF FIELD TRIP 3/1/17 DATE OF RETURN 3/1/17

TIME OF DEPARTURE 7:30 PERIODS (Circle appropriate area(s): 1 2 3 4 5 6 7 All Day)

DESTINATION (include address) Monterey Bay Aquarium 886 Cannery Row Monterey, CA 93940

DISTANCE FROM SCHOOL SITE (one way) 56 miles

TOTAL NUMBER OF PARTICIPANTS 69 NUMBER OF STUDENTS 59 NUMBER OF ADULTS 10

IF OVERNIGHT FIELD TRIP, STATE ACCOMMODATION \_\_\_\_\_

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

IF USING A CHARTERED BUS, IDENTIFY COMPANY Freemant Unified School District

BUS INSURANCE VERIFIED BY BUSINESS SERVICES  JT (initial) INS Exp 6/30/17

IF PRIVATE VEHICLES, IDENTIFY DRIVERS \_\_\_\_\_

All drivers must complete OP-81 with required documents (see pg 2 of field trip process 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)  \_\_\_\_\_ (Business Services initial)

PURPOSE OF TRIP (Explain how trip relates to curriculum) Learn about marine life and adaptations to environment.

COST ANALYSIS: Transportation Cost: \$ 1,260 Other Fees: \$ — Total Cost: \$ 1,260

HOW WILL THIS BE PAID? Students

CHARGE TO ACCOUNT:	FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT
	010	0000	0	5308	00	1110	1000	0270002	016	0000

REQUISITION # \_\_\_\_\_ (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 the District 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 ( ) Approval Denied Superintendent Signature (or designee) \_\_\_\_\_



# FREMONT UNIFIED SCHOOL DISTRICT

## Transportation Department

43770 South Grimmer Blvd., Fremont, CA 94538

(510) 657-1450

FUSD

Randall to Monterey Bay Aquarium

DEPART: Wednesday, 03/01/2017 at 7:30pm / RETURN: Wednesday, 03/01/2017 at 3:00pm

### TRIP INFORMATION

<b>Data Entry Date</b>	<b>TRIP #</b>	<b>Trip Status</b>	<b>Trip Customer Information</b>		
01/12/2017	11783	Confirmed	<b>Code</b>	0145 Randall	
Monterey Bay Aquarium			<b>Agency:</b>	FUSD	
886 Cannery Row			<b>Dept:</b>	None	
Monterey, CA 93940			1300 Edsel Drive		
<b>Received:</b>	01/12/2017	02:41 PM	Milpitas, CA 95035		
<b>Booked:</b>	01/12/2017	<b>Arr Sch Time:</b> 07:15 AM	<b>Phone:</b>	<b>Ext:</b>	<b>Fax:</b>
<b>Depart:</b>	03/01/2017	<b>Lv School:</b> 7:30pm	<b>Contact:</b>		
<b>Return:</b>	03/01/2017	<b>Event Time:</b>	<b>E-Mail:</b>		
<b>Overnight:</b>	<input type="checkbox"/>	<b>Dep Dest:</b> 1:00pm	<b>Acct #:</b> SEND BILL		
<b>Drop/Return:</b>	<input type="checkbox"/>	<b>Rtn Sch:</b> 3:00pm	<b>PO #:</b>		
<b>Out of Area:</b>	<input type="checkbox"/> Take-1 Way				
<b>Food:</b>	<input type="checkbox"/> Return-1 Way				
<b>Trip Type:</b>	Community Trip	<b>Grade:</b>	<b>Estimated Costs</b>		
<b>Leader:</b>	Mathew Aymami				
<b>Student #:</b>	59	<b>Adult #:</b> 10	<b>Per Veh. Est:</b> \$1,260.00		
		<b>W/C:</b> 0	<b>Total Estimated Cost:</b> \$1,260.00		
		<b>Pre-Sch #:</b> 0			
<b>Bus #:</b>	1	<b>Other Veh #:</b> 0			
		<b>Purpose</b>			

<b>Customer Special Instructions</b>	<b>Trip Special Instructions</b>	<b>Trip Comments</b>
FUSD; STAY		

Miscellaneous Expenses	
TRIP EXPENSE DESCRIPTION	\$ EXPENSE
1:	\$0.00
2:	\$0.00
3:	\$0.00
4:	\$0.00
5:	\$0.00
<b>TOTAL MISCELLANEOUS EXPENSES</b>	
	\$0.00

CONFIRMED (TRANSPORTATION): Maerka DATE: 1-12-17



AFTER HOURS PHONE NUMBER FOR FIELD TRIPS: District On-Call 510-377-3389 / Emer. M

Printed by the TransTraks System On: 01/12/2017 02:46:03 PM

PWSH JT/1-31  
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: Marshall Pomeroy DATE REQUEST SUBMITTED: Jan. 19, 2017

PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: Sarah Thomsen (6<sup>th</sup>)

DATE OF FIELD TRIP: March 14, 2017 DATE OF RETURN: March 14, 2017 -

TIME OF DEPARTURE: 7:15am PERIODS (Circle): 1 2 3 4 5 6 7 All Day  TIME OF RETURN: 4:30pm

DESTINATION (include address): Pier 33 (Alcatraz Tours), San Francisco, CA 94133 -

DISTANCE FROM SCHOOL SITE (one way): 50 miles

TOTAL NUMBER OF PARTICIPANTS: 130 NUMBER OF STUDENTS: 108 NUMBER OF ADULTS: 22

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 Transportation

BUS INSURANCE VERIFIED BY ACCOUNT TECH III  JT (initial) (Rm. 17, 19, 22, 25) INS 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): Students' trip to Alcatraz will be integrated into a PLP project-based learning experience about society's development of culture and norms.

COST ANALYSIS: Transportation Cost: \$ 3834 Other Fees: \$ 2908 Total Cost: \$ 6,742

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	027002	018	0000

REQUISITION # 193035 + 193036 (attached) or other explanation of how fees will be paid: \_\_\_\_\_ (i.e. ASB, PTA, students)

REQUESTOR'S SIGNATURE: Sarah Thomsen

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**  
 Milpitas, California 95035

FB

**PURCHASE REQUISITION**  
 THIS IS NOT A PURCHASE ORDER

193035

TT12-1  
 TT12-1

VENDOR'S NAME:

Alcatraz Cruises, LLC

STREET ADDRESS:

River 33 South, Suite 200 415-438-8361

TELEPHONE NO.

CITY, STATE & ZIP CODE:

San Francisco, CA 94111 415-986-1524

FAX NO.

PURCHASE ORDER NUMBER

FISCAL YEAR 16-17

DATE 1-20-2017

REQUISITION NUMBER 193035

CONFIRMING ORDER

1 - 2  3

SITE/CCTR#/DESCRIPTION Pamerey / 027002-018

VENDOR NUMBER

P.O. HANDLING

FAX  MAIL TO VENDOR

DO NOT MAIL TO VENDOR

RETURN VENDOR COPY

TO Pamerey/Thomson

FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT
010	0000	0	5807	00	110	1000	027002	018	0000
									0000
									0000
									0000
									0000

ITEM	ACC	QUANTITY	UNIT	UNIT COST	TAX	DESCRIPTION, CATALOG NUMBER (IE: MODEL, COLOR, SIZE, ETC.)
11	1	EA	\$2,908.00			Fieldtrip to Alcatraz on 3-14-2017 6th grade, rows 17, 19, 22 + 25.
						Total \$2,908.00

APPROVALS:

Complete if Categorical Funds Charged

JUSTIFICATION: \_\_\_\_\_

Page: \_\_\_\_\_ Date: \_\_\_\_\_ Initial \_\_\_\_\_

Activity: \_\_\_\_\_

ORIGINATOR/DEPT HEAD

*[Signature]*  
 PRINCIPAL/AUTHORIZED SIGNATURE

SPEC. ED / CATEGORICAL DIRECTOR

DIRECTOR OF BUDGET AND FISCAL SERVICES

ASSISTANT SUPERINTENDENT, BUSINESS SERVICES



Please Do Not Reply to this Email  
 For all inquiries contact  
[groups@alcatrazcruises.com](mailto:groups@alcatrazcruises.com)

## ITINERARY

### Billing Information

Marshall Pomeroy Elementary  
 Sarah Thomsen  
 1505 Escuela Pkwy  
 Milpitas, CA 95035

### Event Information

Title 031417-GRP-MarshallPomeroyGrp2-1  
 Arrival 3/14/2017  
 Expected Guests 43  
 Honored Guest  
 DOB

7	DT 1Bx ( GrpAdult DT1 Bonded Dx)	3/14/2017	10:00a Alcatraz	\$34.00	\$238.00
36	DT 1Bx ( GrpChild DT1 Bonded Dx)	3/14/2017	10:00a Alcatraz	\$20.00	\$720.00
Account Credit Limit				\$0.00	
Account Balance				\$0.00	
Minimum Deposit Required				\$0.00	
Remaining Deposit Required				\$0.00	
				Sub Total	\$958.00
				Tax	\$0.00
				<b>Itinerary Total</b>	<b>\$958.00</b>
Projected Balance Due					\$958.00

### Features

Payment Received : No      Payment by check due on 2/12/17 - EA 012517

### Schedule

43      DT 1Bx 10:00a Alcatraz

### Special Requirements

Guest ID 8700000000309228 // 7 Adults, 36 Children // Revised from 10 Adults, 40 Children - EA 012517 // \*Please arrive at Pier 33 no later than 9:15 am for a mandatory orientation\*  
 Confirmation#

Tickets must be picked up at the Pier 33 Groups Ticket window 30 minutes prior to departure ( 45 minutes for Youth Groups )  
 \*\* Full payment must be received by your due date, or the tickets will be released. \*\*  
 All bookings within 3 days of departure are considered FINAL and NON-REFUNDABLE.  
 Government Issued Photo IDs are REQUIRED to pick up tickets.  
 Independently Guided Tours are not allowed on Alcatraz Island. Please see [www.alcatrazcruises.com](http://www.alcatrazcruises.com) for more information.

Alcatraz Cruises LLC . Pier 33 South, Suite 200 . San Francisco CA 94111 . 415.438.8381 ph . 415.986.1524 fax

**MILPITAS UNIFIED SCHOOL DISTRICT**  
 Milpitas, California 95035

**PURCHASE REQUISITION**  
 THIS IS NOT A PURCHASE ORDER  
**193036**

VENDOR'S NAME: Michael's Transportation

STREET ADDRESS: 140 Yolano Dr. TELEPHONE NO. 707-643-2099

CITY, STATE & ZIP CODE: Vallejo, CA 94589 FAX NO. 707-643-1906

PURCHASE ORDER NUMBER \_\_\_\_\_ FISCAL YEAR 16-17

DATE: 1-20-2017

REQUISITION NUMBER **193036**

CONFIRMING ORDER (circle one only) 0 - 1 - 2 - **3**

SITE/CCTR#/DESCRIPTION Powersy / 027002-018 Fieldtrip

VENDOR NUMBER \_\_\_\_\_

**SPECIAL INSTRUCTIONS**

Check due: 3-3-2017

P.O. HANDLING

FAX  MAIL TO VENDOR

DO NOT MAIL TO VENDOR

RETURN VENDOR COPY

TO \_\_\_\_\_

		ACCOUNT CODES									
FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT		
1	010	0000	0	5807	00	1110	1000	027002	018		0000
2											0000
3											0000
4											0000
5											0000

ITEM	ACC CODE	QUANTITY	UNIT	UNIT COST	TAX	DESCRIPTION, CATALOG NUMBER (IE: MODEL, COLOR, SIZE, ETC.)
1	1	1	EA	3,834	D	Order # 26621 3 Buses on 3-14-2017 Field trip to Alcatraz, Pier 33, San Francisco. 6 <sup>th</sup> gr grade Rows 17, 19, 22 + 25

APPROVALS:

ORIGINATOR/DEPT. HEAD \_\_\_\_\_

PRINCIPAL/AUTHORIZED SIGNATURE \_\_\_\_\_

SPEC. ED / CATEGORICAL DIRECTOR \_\_\_\_\_

DIRECTOR OF BUDGET AND FISCAL SERVICES \_\_\_\_\_

ASSISTANT SUPERINTENDENT, BUSINESS SERVICES \_\_\_\_\_

DISTRIBUTION: WHITE/YELLOW: ACCOUNTING PINK: SITE

# Confirmation

Michael's Transportation Service, Inc.  
 140 Yolano Dr  
 Vallejo CA 94589  
 Phone: 707-643-2099  
 Fax: 707-643-1906  
 Dispatch: 707-643-2099  
 www.bustransportation.com  
 salinek@bustransportation.com  
 Sales Associate: Saline Kiliona



**Order Number:** 26621  
 Order Date: 9/21/2016  
 Customer NO.: 3810  
 Phone: 408-431-0248  
 Email: BOOKFAIR.POMEROY@GMAIL.COM  
 Number of Vehicles: 3

MARSHALL POMEROY  
 CINDY KITaura  
 1505 ESCUELA PKWY  
 Milpitas CA 95035

Pickup	Destination	Amount	Misc. Charges	Total
Tuesday 3/14/2017 Spot: 07:00AM Depart: 07:15AM		\$1,278.00		\$1,278.00
MARSHALL POMEROY 1505 ESCUELA PKWY Milpitas CA 95035 Return 3/14/2017 10:15AM Vehicle Type: SCHOOL BUS	PIER 33 EMBARCADERO SAN FRANCISCO CA Depart From Destination 3/14/2017 2:30PM			
SARAH GREEN-THOMSEN - Mobile Number: 510-676-1220 Number of Passengers: 152 (3) BUS MOVE				
Tuesday 3/14/2017 Spot: 07:00AM Depart: 07:15AM		\$1,278.00		\$1,278.00
MARSHALL POMEROY 1505 ESCUELA PKWY Milpitas CA 95035 Return 3/14/2017 10:15AM Vehicle Type: SCHOOL BUS	PIER 33 EMBARCADERO SAN FRANCISCO CA Depart From Destination 3/14/2017 2:30PM			
SARAH GREEN-THOMSEN - Mobile Number: 510-676-1220 Number of Passengers: 152 (3) BUS MOVE				
Tuesday 3/14/2017 Spot: 07:00AM Depart: 07:15AM		\$1,278.00		\$1,278.00
MARSHALL POMEROY 1505 ESCUELA PKWY Milpitas CA 95035 Return 3/14/2017 10:15AM Vehicle Type: SCHOOL BUS	PIER 33 EMBARCADERO SAN FRANCISCO CA Depart From Destination 3/14/2017 2:30PM			
SARAH GREEN-THOMSEN - Mobile Number: 510-676-1220 Number of Passengers: 152 (3) BUS MOVE				

**Total:** \$3,834.00  
**Amount Paid:**  
**Balance Due:** \$3,834.00

Nancy JT/1-23  
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: \_\_\_\_\_

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

DATE OF FIELD TRIP: 3/21/17 Tue DATE OF RETURN: 3/21/17

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

DESTINATION (include address): AT&T Park & Fisherman's Wharf

DISTANCE FROM SCHOOL SITE (one way): 48 miles

TOTAL NUMBER OF PARTICIPANTS: 40 NUMBER OF STUDENTS: 38 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  IT (initial) Ins Exp 12/31/17

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): Industry tour for Travel & Tourism Academy.

COST ANALYSIS: Transportation Cost: \$ 720.00 Other Fees: \$ 400 fee + 300 sub Total Cost: \$ 1420

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 # 198464 Fee (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) \_\_\_\_\_

DISTRIBUTION AFTER APPROVAL: WHITE: Purchasing/Contracts YELLOW: School Site PINK: Teacher REVISED MAR 2012 bll

SHIP'D JAN 20

# SHADED AREAS FOR DISTRICT OFFICE USE ONLY

511-23

**MILPITAS UNIFIED SCHOOL DISTRICT**  
 Milpitas, California 95035

**PURCHASE REQUISITION**  
 THIS IS NOT A PURCHASE ORDER  
**192911**

VENDOR'S NAME: First Student Inc.

SPECIAL INSTRUCTIONS

STREET ADDRESS: 22157 Network Place 855-870-8747

TELEPHONE NO.

CITY, STATE & ZIP CODE: Chicago, IL 60673-1221

FAX NO.

PURCHASE ORDER NUMBER \_\_\_\_\_ FISCAL YEAR 16-17

DATE 1/12/17

REQUISITION NUMBER **192911**

CONFIRMING ORDER (circle one only) 0 1 - 2 - 3

SITE/CCTR#/DESCRIPTION MHS/722001/Bus/Field Trip

VENDOR NUMBER \_\_\_\_\_

**P.O. HANDLING**

FAX  MAIL TO VENDOR

DO NOT MAIL TO VENDOR

RETURN VENDOR COPY TO \_\_\_\_\_

		ACCOUNT CODES									
FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT		
1	060	7220	0	5807	00	1110	1000	722001	091	0000	
2										0000	
3										0060	
4										0000	
5										0000	

ITEM ACC CODE	QUANTITY	UNIT	UNIT COST	TAX	DESCRIPTION, CATALOG NUMBER (IE: MODEL, COLOR, SIZE, ETC.)
	1		685.31		Bus to AT&T Park & Fisherman's Wharf for Industry tour field trip for AOTT Academy ON 3-21-17
RECEIVED MILPITAS USD JAN 20 2017 EDUCATIONAL SERVICES					
Complete if Categorical Funds Charged					
JUSTIFICATION: <u>Student Learning</u>					

APPROVALS: [Signature] Brownsstein x4185 [Signature]

ORIGINATOR/DEPT. HEAD

SPEC. ED / CATEGORICAL DIRECTOR

DIRECTOR OF BUDGET AND FISCAL SERVICES

Page: 7 Date: 1/12/17 Initial SB

Activity: Field Trip

# SHADED AREAS FOR DISTRICT OFFICE USE ONLY

ST 1-23

**MILPITAS UNIFIED SCHOOL DISTRICT**  
 Milpitas, California 95035

**PURCHASE REQUISITION**  
 THIS IS NOT A PURCHASE ORDER

**198464**

VENDOR'S NAME: S.F. Giants / AT&T Park TOURS

STREET ADDRESS: 24 Willie Mays Plaza 415-972-1850  
 TELEPHONE NO.

CITY, STATE & ZIP CODE: San Francisco, CA 94107 415-972-1850  
 FAX NO.

PURCHASE ORDER NUMBER: \_\_\_\_\_ FISCAL YEAR: 16-17

DATE: 1/12/17

REQUISITION NUMBER: **198464**

CONFIRMING ORDER (circle one only): 0 - 1 - 2 - 3

SITE/CCTR#/DESCRIPTION: MHS/722001/Field Trip

VENDOR NUMBER: \_\_\_\_\_

P.O. HANDLING

FAX  MAIL TO VENDOR

DO NOT MAIL TO VENDOR

RETURN VENDOR COPY

Will be hand delivered

TO \_\_\_\_\_

FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT
1	0607220	0	5807	00	1110	1000	722001	041	0000
2									0000
3									0000
4									0000
5									0000

**SPECIAL INSTRUCTIONS**

Please notify Tricia Brownstein x4185 when check is ready. tbrownstern@msd.org

DESCRIPTION, CATALOG NUMBER (IE: MODEL, COLOR, SIZE, ETC.):

Fee for Green Glove tour for AOTI Academy students / Industry visit for CTE elective. on 3-29-17

ITEM	ACC CODE	QUANTITY	UNIT	UNIT COST	TAX
		1		400.00	

RECEIVED  
 MILPITAS USD

JAN 20 2017

EDUCATIONAL SERVICES

Complete if Categorical Funds Charged

JUSTIFICATION: Student Learning

Page: 7 Date: 1/12/17 Initial: TB

Activity: Field Trip

APPROVALS: Brownstein x4185

ORIGINATOR/DEPT. HEAD

SPEC. ED / CATEGORICAL DIRECTOR

DIRECTOR OF BUDGET AND FISCAL SERVICES

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: Spangler DATE REQUEST SUBMITTED: 1/15/17

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

DATE OF FIELD TRIP: 3/28/17 DATE OF RETURN: 3/28/17

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

DESTINATION (include address): Columbia State Historic Park

DISTANCE FROM SCHOOL SITE (one way): 120 miles

TOTAL NUMBER OF PARTICIPANTS: 110 NUMBER OF STUDENTS: 87 NUMBER OF ADULTS: 23

OVERNIGHT FIELD TRIP, STATE ACCOMMODATION: [X]

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

IF USING A CHARTERED BUS, IDENTIFY COMPANY: Fremont USD

INSURANCE VERIFIED BY ACCOUNT TECH III [X] II (initial) Ins Exp 6/30/17

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): Experience first hand life in the Gold Rush Era ~ CA History

COST ANALYSIS: Transportation Cost: \$ 1680 Other Fees: \$ 500 Total Cost: \$ 2180

HOW WILL THIS BE PAID?

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

ACQUISITION # (attached) or other explanation of how fees will be paid: fundraising (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)

532  
music

JT/1-27

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)

OP-40

SCHOOL: TRMS DATE REQUEST SUBMITTED: 1/20/17

PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: Nicole Poulin

DATE OF FIELD TRIP: ~~5/10/17~~ ~~3/9/17~~ 5/10/17 DATE OF RETURN: ~~5/10/17~~ ~~3/9/17~~ 5/10/17

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

DESTINATION (include address): Davies Sym Hall 201 Van Ness Ave S.F.

DISTANCE FROM SCHOOL SITE (one way): 50 miles

TOTAL NUMBER OF PARTICIPANTS: 166 NUMBER OF STUDENTS: 152 NUMBER OF ADULTS: 14

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: \_\_\_\_\_

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):  
Workshop with the S.F. Symphony

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
										0000

REQUISITION # \_\_\_\_\_ (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) \_\_\_\_\_

Paid by music Boosters via concert donations AND donations

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: Rose DATE REQUEST SUBMITTED: May 16, 2017 <sup>1-20-17</sup>

PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: Ramón Vijil

DATE OF FIELD TRIP: May 16, 2017 DATE OF RETURN: May 16, 2017

TIME OF DEPARTURE: 8:15 PERIODS (Circle): 1 2 3 4 5 6 7 (All Day) TIME OF RETURN: 2:45

DESTINATION (include address): 886 Cannery Row Monterey, CA 93940 (Aquarium)

DISTANCE FROM SCHOOL SITE (one way): 76.9 miles ✓

TOTAL NUMBER OF PARTICIPANTS: 75 NUMBER OF STUDENTS: 66 NUMBER OF ADULTS: 9

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) Exp. 12/31/17

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): Hands on science lab where they'll explore animals' adaptations.

COST ANALYSIS: Transportation Cost: \$ 772.35 Other Fees: \$ \_\_\_\_\_ Total Cost: \$ 772.35

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: \_\_\_\_\_ (i.e. ASB, PTA, students)

REQUESTOR'S SIGNATURE: Ramón Vijil

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/ 2-3-17

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: Marshall Pomeroy DATE REQUEST SUBMITTED: 1-24-17  
 PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: C. Cabrera for 4th grade  
 DATE OF FIELD TRIP: Thur. 5-25-17 DATE OF RETURN: 5-25-17  
 TIME OF DEPARTURE: 7am PERIODS (Circle): 1 2 3 4 5 6 7 All Day TIME OF RETURN: 5:30pm  
 DESTINATION (include address): Columbia State Park 11255 Jackson St., Columbia  
CA 95310-  
 DISTANCE FROM SCHOOL SITE (one way): 120 miles / CAC  
 TOTAL NUMBER OF PARTICIPANTS: 128 NUMBER OF STUDENTS: ~~33~~ 99 NUMBER OF ADULTS: 29  
 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 Rm.16 = \$1965  
 BUS INSURANCE VERIFIED BY ACCOUNT TECH III  JT (initial) Ins. EXP 02/01/17 Rm. 18 = \$1965  
 Rm. 23 = 1935  
 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): SS 4.3.3 Students analyze the effects of the Gold Rush on settlements, daily life, politics, and the physical environment.

COST ANALYSIS: Transportation Cost: \$ 5,805 Other Fees: \$ 60 Total Cost: \$ 5,865  
for 2 workshops

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	027002	018	0000

REQUISITION # 193039 (attached) or other explanation of how fees will be paid: \_\_\_\_\_ (i.e. ASB, PTA, students)  
+ F-10  
 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) \_\_\_\_\_

Conditional approval - Bus Insurance.

**MILPITAS UNIFIED SCHOOL DISTRICT**  
 Milpitas, California 95035

**PURCHASE REQUISITION**  
 THIS IS NOT A PURCHASE ORDER

**193039**

TT/2-3-17

VENDOR'S NAME: Royal Coach Tours **46**

STREET ADDRESS: 638 Stockton Ave 408-279-4801

CITY, STATE & ZIP CODE: San Jose, CA 95126 408-286-1410

PURCHASE ORDER NUMBER: \_\_\_\_\_ FISCAL YEAR: 16-17

DATE: 1-30-2017

REQUISITION NUMBER: **193039**

CONFIRMING ORDER (circle one only) 0 - 1 - 2 - 3

SITE/CCTR#/DESCRIPTION: Poweney 10270-02  
Field trip

VENDOR NUMBER: \_\_\_\_\_

P.O. HANDLING

FAX  MAIL TO VENDOR

DO NOT MAIL TO VENDOR

RETURN VENDOR COPY

TO \_\_\_\_\_

		ACCOUNT CODES									
FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT		
1	010	0000	0	5807	00	1110	1000	027002	018	0000	
2										0000	
3										0000	
4										0000	
5										0000	

ITEM	ACC CODE	QUANTITY	UNIT	UNIT COST	TAX	DESCRIPTION, CATALOG NUMBER (IE: MODEL, COLOR, SIZE, ETC.)
1	1	ea	5,805	N		Trip to Columbia State Park on 5-25-2017 3 Buses 4 <sup>th</sup> gr = Rooms 16, 18 & 23 Chartered rd; 9916
						Rooms 16 \$1965
						18 \$1965
						23 \$1935

Complete if Categorical Funds Charged

JUSTIFICATION: \_\_\_\_\_

Page: \_\_\_\_\_ Date: \_\_\_\_\_ Initial: \_\_\_\_\_

Activity: \_\_\_\_\_

APPROVALS:

[Signature]  
 ORIGINAL/ORD/DEPT. HEAD  
 PRINCIPAL/AUTHORIZED SIGNATURE

SPEC. ED / CATEGORICAL DIRECTOR

DIRECTOR OF BUDGET AND FISCAL SERVICES

ASSISTANT SUPERINTENDENT, BUSINESS SERVICES