

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 Schlettbaum
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: \$ N/A 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
010	0000	0	1151	00	1110	1000	093400	041	0000

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) _____

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

ST/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) _____

SHADED AREAS FOR DISTRICT OFFICE USE ONLY

MILPITAS UNIFIED SCHOOL DISTRICT
 Milpitas, California 95035

PURCHASE REQUISITION
 THIS IS NOT A PURCHASE ORDER

198689

IT/2-3-17

VENDOR'S NAME: F.U.S.D.

STREET ADDRESS: 43770 S. Grimmer Blvd (510) 657-1450

TELEPHONE NO.

CITY, STATE & ZIP CODE: Fremont, Ca.

FAX NO.

PURCHASE ORDER NUMBER

FISCAL YEAR

17/18

DATE

1/12/17

REQUISITION NUMBER

198689

CONFIRMING ORDER

0 - 1 - 2 - 3

SITE/CCTR#/DESCRIPTION

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
010	0000	0	5308 5807	02	1110	1000	027000	0160	0000
2									0000
3									0000
4									0000
5									0000

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

Cost of bus for 2nd grade field trip to Monterey Bay Aquarium

total: \$1260

Complete if Categorical Funds Charged

JUSTIFICATION:

Page: _____ Date: _____ Initial _____

Activity:

APPROVALS:

ORIGINATOR/DEPT. HEAD

SPEC. ED / CATEGORICAL DIRECTOR

DIRECTOR OF BUDGET AND FISCAL SERVICES

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

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

Customer Special Instructions

FUSD; STAY

Trip Special Instructions

Trip Comments

Miscellaneous Expenses

TRIP EXPENSE DESCRIPTION

\$ EXPENSE

1:		\$0.00
2:		\$0.00
3:		\$0.00
4:		\$0.00
5:		\$0.00

TOTAL MISCELLANEOUS EXPENSES

\$0.00

CONFIRMED (TRANSPORTATION):

Mueita

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

Page 1 of 1

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)

PWSH JT/1-31
OP-40

SCHOOL: Marshall Pomeroy DATE REQUEST SUBMITTED: Jan. 19, 2017
PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: Sarah Thomsen (6th)
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) IN 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) _____

DISTRIBUTION AFTER APPROVAL:

WHITE: Purchasing/Contracts

YELLOW: School Site

PINK: Teacher

REVISED MAR 2012 bil

2

Alcatraz Cruises, LLC

River 33 South, Suite 200

415-438-8361

ODE: San Francisco, CA 94111

415-986-1524

FISCAL YEAR 16-17

DATE 1-20-2017

REQUISITION NUMBER 193035

0 - 1 - 2 - 3

CRIPION Pameroq / 027002-018
Encl 1 (cont)

VENDOR NUMBER

☐ FAX ☐ MAIL TO VENDOR

☒ DO NOT MAIL TO VENDOR

☐ RETURN VENDOR COPY

TO Poweren / Themsen

5

APPROVALS:

ORIGINATOR/DEPT HEAD

SPEC. ED / CATEGORICAL DIRECTOR

DIRECTOR OF BUDGET AND FISCAL SERVICES

Complete if Categorical Funds Charged

JUSTIFICATION:

Page: _____ Date: _____ Initial: _____

Activity: _____

UNIVERSITY OF CALIFORNIA, BERKELEY
 UNIVERSITY PURCHASE REQ./REVISED FEB 2012 bll

DISTRIBUTION:

WHITE/YELLOW: ACCOUNTING

DINIK: CITR

ASSISTANT SUPERINTENDENT, BUSINESS SERVICES



Please Do Not Reply to this Email
For all inquiries contact
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
				Itinerary Total	\$958.00
				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 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 Yelane Dr.

707-643-2099

TELEPHONE NO.

CITY, STATE & ZIP CODE:

Vallejo, CA 94589

707-643-1906

FAX NO.

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

Powerey / 027002-018
Fieldtrip

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
2									0000
3									0000
4									0000
5									0000

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

ITEM	ACC CODE	QUANTITY	UNIT	UNIT COST	TAX	DESCRIPTION, CATALOG NUMBER (IE: MODEL, COLOR, SIZE, ETC.)
11	1	24	3,834			Order # 26621
						3 Buses on 3-14-2017
						Field trip to Alcatraz, Pier 33, San Francisco.
						6th grade
						Rowers? 17, 19, 22 + 25
						<p>JUSTIFICATION: _____</p> <p>Page: _____ Date: _____ Initial: _____</p> <p>Activity: _____</p>

Complete if Categorical Funds Charged

APPROVALS:

ORIGINATOR/DEPT. HEAD

SPEC. ED / CATEGORICAL DIRECTOR

DIRECTOR OF BUDGET AND FISCAL SERVICES

PRINCIPAL/AUTHORIZED SIGNATURE

ASSISTANT SUPERINTENDENT, BUSINESS SERVICES

Confirmation

Page 1

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 Kilion



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

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: AOTI
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	041	0000

REQUISITION # 198464 Fee 192911 Bus 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) _____

SHIP'D JAN 20

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

192911

VENDOR'S NAME: First Student Inc.

STREET ADDRESS: 22157 Network Place 855-870-8747

TELEPHONE NO.

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

FAX NO.

PURCHASE ORDER NUMBER 16-17

FISCAL YEAR

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	041
2									0000
3									0060
4									0000
5									0000

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

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: Student Learning

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

Activity: Field Trip

APPROVALS:

Brownstein x4185

ORIGINATOR/DEPT. HEAD

SPEC. ED / CATEGORICAL DIRECTOR

DIRECTOR OF BUDGET AND FISCAL SERVICES

SHADED AREAS FOR DISTRICT OFFICE USE ONLY

JT1-23

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

CITY, STATE & ZIP CODE:

San Francisco, CA 94107

415-972-1850

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

[Redacted]

P.O. HANDLING

☐ FAX ☐ MAIL TO VENDOR

☒ DO NOT MAIL TO VENDOR

☐ RETURN VENDOR COPY

Will be hand delivered to [Redacted]

SPECIAL INSTRUCTIONS

Please notify Tricia Brownstein x4185 when check is ready. Brownstein must org

ACCOUNT CODES									
FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT
1	060720	0	5807	00	1110	1000	72001	041	0000
2									0000
3									0000
4									0000
5									0000

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

Fee for Green Glove tour for Atoll Academy students / Industry visit for CTE elective. on 3-28-17

Complete if Categorical Funds Charged

JUSTIFICATION:

Student Learning

Page:

7

Date:

1/12/17

Initial

TB

Activity:

Field trip

RECEIVED
MILPITAS USD
JAN 20 2017
EDUCATIONAL SERVICES

APPROVALS:

[Signature]

Brownstein x4185

[Signature]

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: Ø

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

IF USING A CHARTERED BUS, IDENTIFY COMPANY: Fremont USD

INSURANCE VERIFIED BY ACCOUNT TECH III ☒ 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?

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: fundraising (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) _____

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

Paid by music Boosters via concert concessions AND donations

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: _____

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) _____

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

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
DISTANCE FROM SCHOOL SITE (one way): 120 miles / CAC CA 95310-
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 ☒ IT (initial) Ins. Exp 02/01/17 Rm. 18 = \$1965
IF PRIVATE VEHICLES USED, IDENTIFY DRIVERS: _____ Rm. 23 = 1935

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)
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

5/12-3-17

VENDOR'S NAME: Royal Coach Tours

STREET ADDRESS: 638 Stockton Ave 408-279-4801

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

PURCHASE ORDER NUMBER: 1-30-2017 FISCAL YEAR: 16-17

DATE: 1-30-2017

REQUISITION NUMBER: **193039**

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

SITE/CCTR#/DESCRIPTION: Powerny 10270-02

VENDOR NUMBER: Field trip

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	80	1110	1000	027002	0180000
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 th gr = Rooms 16, 18 & 23
						Chartered id: 9916
						Room 16 \$1965
						Room 18 \$1965
						Room 23 \$1935

APPROVALS:

 ORIGINAL/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