

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)

Danielle JT/3-30  
OP-40

SCHOOL: MHS DATE REQUEST SUBMITTED: 3-17-17

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

DATE OF FIELD TRIP: 4-21-17 DATE OF RETURN: 4-21-17

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

DESTINATION (include address): University of Pacific 3601 Pacific Ave. Stockton, Ca. 95211

DISTANCE FROM SCHOOL SITE (one way): 71 miles

TOTAL NUMBER OF PARTICIPANTS: 54 NUMBER OF STUDENTS: 52 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 Fremont USD

BUS INSURANCE VERIFIED BY ACCOUNT TECH III ☒ IT (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): AVID College Tour

\_\_\_\_\_

COST ANALYSIS: Transportation Cost: \$ 905.66 Other Fees: \$ 380.00 Total Cost: \$ 1,285.66

HOW WILL THIS BE PAID?

CHARGE TO ACCOUNT:	FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT
	060	0000	0	5807	00	1110	1000	709100	041	0000

REQUISITION # 193630 (attached) or other explanation of how fees will be paid: \_\_\_\_\_ (i.e. ASB, PTA, students)

REQUESTOR'S SIGNATURE: [Signature] xt 4009

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): \_\_\_\_\_

RECEIVED MILPITAS USD

★ 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) \_\_\_\_\_

EDUCATIONAL SERVICES

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

SHIPD MAR 28 2017

**Milpitas, California 95035**

Tremont Unified S.D.

43770 S. Gimmer Blvd

510-657-1458

Fremont, CA 94538

510-657-1589

FISCAL YEAR

16-17

3-23-17

193630

0 - 1 - 2 - 3

MHS/010703/Bus

1

ITEM	ACC CODE	QUANTITY	UNIT	UNIT COST	TAX
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1	1	1,100	N	Buss-AUEP students to University of Pacific
1	1			on 4/21/17 (Trip# 12075)

RECEIVED  
MILPITAS USD

MAR 29 2017

EDUCATIONAL SERVICES

**Complete if Categorical Funds Charged**

**JUSTIFICATION:**

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

Activity:

APPROVALS:

ORIGINATOR/DEPT. HEAD

SPEC. ED / CATEGORICAL DIRECTOR

DIRECTOR OF BUDGET AND FISCAL SERVICES



Danielle  
OP-40  
JT/3-24

**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: Milpitas High DATE REQUEST SUBMITTED: March 13, 2017  
PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: AVID / Parada + Hall  
DATE OF FIELD TRIP: Thurs April 27, 2017 DATE OF RETURN: Thurs April 27, 2017  
TIME OF DEPARTURE: 8:00AM PERIODS (Circle): 1 2 3 4 5 6 7 All Day TIME OF RETURN: 3:30PM  
DESTINATION (include address): CSU Monterey Bay 5108 4th Ave Marina, CA 93955  
DISTANCE FROM SCHOOL SITE (one way): 73 miles  
TOTAL NUMBER OF PARTICIPANTS: 62 NUMBER OF STUDENTS: 60 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: Michael's Transportation Service Inc.

BUS INSURANCE VERIFIED BY ACCOUNT TECH III ☒ JT (initial) ±ms 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): This is an AVID field trip to  
to tour college campuses and learn about admissions  
and financial aid.

COST ANALYSIS: Transportation Cost: \$ 1,183.25 Other Fees: \$ 300.00 <sup>(subs)</sup> Total Cost: \$ 1,503.25

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 # 193605 (attached) or other explanation of how fees will be paid: \_\_\_\_\_ (i.e. ASB, PTA, students)

REQUESTOR'S SIGNATURE: Cassandra Parada x-4068

PRINCIPAL'S SIGNATURE: [Signature] 3/21/17 ☒ Approved ( ) Not approved

EDUCATIONAL SERVICES  
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) \_\_\_\_\_



# SHADED AREAS FOR DISTRICT OFFICE USE ONLY

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

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

**193605**

*Danielle JT 12-24*

VENDOR'S NAME: Michael's Transportation Service

STREET ADDRESS: 140 Yolano Drive

TELEPHONE NO. 707-643-2099

CITY, STATE & ZIP CODE: Vallejo, CA 94589

FAX NO. 707-643-2099

PURCHASE ORDER NUMBER

FISCAL YEAR 2017

DATE 3/13/17

REQUISITION NUMBER **193605**

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

SITE/CCTR#/DESCRIPTION MHS/709100

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	05807	00	1110	1000	709100	041	0000
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
1	1	1	ea	1,183.25		Michael's Transportation Charter Bus -
						AND Field Trip to CSU Monterey Bay
						on 4/27
						Order # 31143

Complete if Categorical Funds Charged

JUSTIFICATION:

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

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

APPROVALS:

*CPA* x4008

*MHS*

DIRECTOR OF BUDGET AND FISCAL SERVICES

ORIGINATOR/DEPT. HEAD

SPEC. ED / CATEGORICAL DIRECTOR

Danielle

OP-40 ✓ JT/ 3-24

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: 3/15/17

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

DATE OF FIELD TRIP: 4/27/17 DATE OF RETURN: 4/27/17

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

DESTINATION (include address): UC Davis, 1 Shields Ave, Davis CA 95616

DISTANCE FROM SCHOOL SITE (one way): 93 miles

TOTAL NUMBER OF PARTICIPANTS: 60 NUMBER OF STUDENTS: 57 NUMBER OF ADULTS: 3

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: Michaels Transportation Service

BUS INSURANCE VERIFIED BY ACCOUNT TECH III ☒ JT (initial) 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): AVIO college tour  
Freshman and Sophomores

MAR 22 2017

COST ANALYSIS: Transportation Cost: \$ 1229.25 Other Fees: \$ 370 Total Cost: \$ 1599.25

HOW WILL THIS BE PAID?

CHARGE TO ACCOUNT:	FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT
	10	0000	<del>5807</del>	5807	00	1110	1000	709100	011200	041 0000

REQUISITION # 193611 (attached) or other explanation of how fees will be paid: \_\_\_\_\_ (i.e. ASB, PTA, students)

REQUESTOR'S SIGNATURE: [Signature]

PRINCIPAL'S SIGNATURE: [Signature] 3/21/17 ( ) 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

CHUPD MAR 22 2017



# SHADED AREAS FOR DISTRICT OFFICE USE ONLY

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

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

**193611**

*Danielle JT 1/3*

VENDOR'S NAME: Michael's Transportation Svc.

STREET ADDRESS: 140 Yolande Dr. (707) 643-2099

CITY, STATE & ZIP CODE: Vallejo CA 94589 (707) 643-1906

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

DATE: 2/15/17

REQUISITION NUMBER: **193611**

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

SITE/CCTR#/DESCRIPTION: MITS 1010731 Bus Service

VENDOR NUMBER:                     

P.O. HANDLING

☒ FAX ☐ MAIL TO VENDOR

☐ DO NOT MAIL TO VENDOR

☐ RETURN VENDOR COPY TO                     

FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT
1	010	0000	0	5807	00	1110	1000	011200	041
2	010	0000	0	5807	00	1110	1000	709100	04
3									0000
4									0000
5									0006

ITEM	ACC CODE	QUANTITY	UNIT	UNIT COST	TAX	DESCRIPTION, CATALOG NUMBER (IE: MODEL, COLOR, SIZE, ETC.)
1	1/3	1	EA	1,229.25	N	Bus (Michael's Transportation) AVID students to UC Davis on 4/27/17
						Quote # 31199
						Pay \$400.00 from CE# 011200
						Pay Balance from 709100
						RECEIVED MILPITAS USD
						MAR 22 2017

Complete if Categorical Funds Charged

JUSTIFICATION: SPSA Goal (AVID)

School Climate & Culture

Page: 2/16/17 Date: 2/16/17 Initial:                     

Activity: visit UC Davis

APPROVALS:

*CE Ferguson* *Elizabeth Gable Ferguson* *X4022*

EDUCATIONAL SERVICES  
SPEC. ED / CATEGORICAL DIRECTOR

DIRECTOR OF BUDGET AND FISCAL SERVICES



JT/3-31

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: 3/17/2017

PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: Mrs. McNeil's 1st Grade

DATE OF FIELD TRIP: 5/2/2017 DATE OF RETURN: 5/2/2017

TIME OF DEPARTURE: 8:15 am PERIODS (Circle): 1 2 3 4 5 6 7 All Day TIME OF RETURN: 2:30 pm

DESTINATION (include address): California Academy of Science 55 Music Concourse Dr.

DISTANCE FROM SCHOOL SITE (one way): 48 miles S.F. 94118

TOTAL NUMBER OF PARTICIPANTS: 32 NUMBER OF STUDENTS: 25 NUMBER OF ADULTS: 7

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 12/31/17

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): 1st Grade is studying plants/animals/layer of rainforest.

The Academy has a great multi-story live rainforest exhibit.

COST ANALYSIS: Transportation Cost: \$ 654.49 Other Fees: \$ 254.40 Total Cost: \$ 908.89

HOW WILL THIS BE PAID?

CHARGE TO ACCOUNT: 

FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT
									0000

REQUISITION # 190499 (attached) or other explanation of how fees will be paid: PTA (i.e. ASB, PTA, students)

REQUESTOR'S SIGNATURE: Carol McNeil

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) \_\_\_\_\_

14-4 | 5+

190499



855-870-8749

89. CH. 95122

FISCAL YEAR 16-17

3.29.17

REQUISITION NUMBER 190499

0 - 1 - 2 - 3

15. Data Field Trip

VENDOR NUMBER

☐ FAX ☐ MAIL TO VENDOR

☐ DO NOT MAIL TO VENDOR

☐ RETURN VENDOR COPY

TO \_\_\_\_\_

[illegible]

ITEM	ACC CODE	QUANTITY	UNIT	UNIT COST	TAX
00	00	1	1	654.49	x

Mr. McNeil's first grade class taking  
First Student bus to CA Academy of Science  
in S.F. on May 05, 2017.

**Complete if Categorical Funds Charged**

**JUSTIFICATION:**

Page: \_\_\_\_\_ Date: \_\_\_\_\_ Initials: \_\_\_\_\_

Activity:

APPROVALS:

ORIGINATOR/DEPT. HEAD

SPEC. ED. / CATEGORICAL DIRECTOR

DIRECTOR OF BUDGET AND FISCAL SERVICES

PRINCIPAL/AUTHORIZED SIGNATURE

FORMS-Purchase Req./Revised FEB 2012 bl

**DISTRIBUTION:**

WHITE/YELLOW: ACCOUNTING

PINK: SITE

ASSISTANT SUPERINTENDENT, BUSINESS 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: Curtner Elementary DATE REQUEST SUBMITTED: February 28, 2017

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

DATE OF FIELD TRIP: 5/4/17 DATE OF RETURN: 5/4/17

TIME OF DEPARTURE: 8:30 Am PERIODS (Circle): 1 2 3 4 5 6 7 All Day ☒ TIME OF RETURN: 2:00 pm

DESTINATION (include address): CA Academy of Sciences

DISTANCE FROM SCHOOL SITE (one way): 53 miles

TOTAL NUMBER OF PARTICIPANTS: 117 NUMBER OF STUDENTS: 93 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: 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): Exploration of Life Sciences

COST ANALYSIS: Transportation Cost: \$ 1,271.18 Other Fees: \$ 985.80 Total Cost: \$ 2,256.98

HOW WILL THIS BE PAID?

CHARGE TO ACCOUNT:	FD	RES	Y	OBJ	SOBJ	GOAL	FUNC	CCTR	SCH	MGMT
								<u>027002</u>	<u>15</u>	<u>0000</u>

REQUISITION # 92749 (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) \_\_\_\_\_

192749

**THIS IS NOT A PURCHASE ORDER**



TELEPHONE NO.

CODE: S.T. CA- 95122

FAX NO. \_\_\_\_\_

FISCAL YEAR 16-17

3-21-2017

192749

0 - 1 - 2 - 3

5/037003/field trip

VENDOR NUMBER

ITEM	ACC CODE	QUANTITY	UNIT	UNIT COST	TAX
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☐ FAX ☐ MAIL TO VENDOR

☐ DO NOT MAIL TO VENDOR

☐ RETURN VENDOR COPY

TO \_\_\_\_\_

[illegible][illegible]

**JUSTIFICATION:**

Page: \_\_\_\_\_ Date: \_\_\_\_\_ Initials: \_\_\_\_\_

### Activity:

APPROVALS:

ORIGINATOR/DEPT. HEAD

SPEC. ED / CATEGORICAL DIRECTOR

DIRECTOR OF BUDGET AND FISCAL SERVICES

PRINCIPAL/AUTHORIZED SIGNATURE

FORMS-Purchase Req./Revised FEB 2012 b11

### DISTRIBUTION:

WHITE/YELLOW: ACCOUNTING

PINK: SITE

ASSISTANT SUPERINTENDENT, BUSINESS SERVICES



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: Curtner DATE REQUEST SUBMITTED: 3.21.17

PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: Kindergarten team

DATE OF FIELD TRIP: 5.12.17 DATE OF RETURN: 5.12.17

TIME OF DEPARTURE: 8:45a PERIODS (Circle): 1 2 3 4 5 6 7 All Day TIME OF RETURN: 2:00p

DESTINATION (include address): Cal Academy of Science 55 music concourse dr, San Francisco

DISTANCE FROM SCHOOL SITE (one way): 53 miles

TOTAL NUMBER OF PARTICIPANTS: 116 NUMBER OF STUDENTS: 94 NUMBER OF ADULTS: 22

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: East Side Union HS District

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

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): will be studying ocean animals + plants as part of our SEAL unit, visit will focus on aquarium

COST ANALYSIS: Transportation Cost: \$ 1326.68 Other Fees: \$ 938.10 Total Cost: \$ 2264.78

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: PTA/class accounts

REQUESTOR'S SIGNATURE: AR

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) \_\_\_\_\_

## 190498

THIS IS NOT A PURCHASE ORDER

## SPECIAL INSTRUCTIONS

## SPECIAL INSTRUCTIONS

FISCAL YEAR 16-17

FISCAL YEAR 16-17

FISCAL YEAR 16-17

15-027003-field trip

☐ RETURN VENDOR COPY

TO \_\_\_\_\_

[illegible][illegible]

**DIRECTOR OF BUDGET AND FISCAL SERVICES**

PRINCIPAL/AUTHORIZED SIGNATURE

ASSISTANT SUPERINTENDENT, BUSINESS SERVICES



**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: Rancho MMS DATE REQUEST SUBMITTED: 4/4/17

PERSON/CLASS/GROUP OR ORGANIZATION MAKING THE TRIP REQUEST: Rancho Yearbook

DATE OF FIELD TRIP: 5/15/17 DATE OF RETURN: 5/15/17

TIME OF DEPARTURE: 8:30am PERIODS (Circle): 1 2 3 4 5 6 7 All Day TIME OF RETURN: 3:00pm

DESTINATION (include address): SF Museum of Modern Art 151 2<sup>nd</sup> St., SF 94103

DISTANCE FROM SCHOOL SITE (one way): 48 miles

TOTAL NUMBER OF PARTICIPANTS: 29 NUMBER OF STUDENTS: 26 NUMBER OF ADULTS: 3

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: \_\_\_\_\_

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): Students will learn about photography & art, which are key elements to the YE elective. Students will reflect on their own artistic styles in order to enhance their passion of art & photography.

COST ANALYSIS: Transportation Cost: \$ 130 Other Fees: \$ 60 Total Cost: \$ 190

HOW WILL THIS BE PAID? Students will pay for transportation. Adults will pay

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: Lynn Ransom

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) \_\_\_\_\_

Museum admission.