



SACRAMENTO CITY UNIFIED SCHOOL DISTRICT BOARD OF EDUCATION

Agenda Item# 12.1c

Meeting Date: April 13, 2023

Subject: Approve Rosemont High Field Trip to Houston, TX April 19-24, 2023

- Information Item Only
- Approval on Consent Agenda
- Conference (for discussion only)
- Conference/First Reading (Action Anticipated: _____)
- Conference/Action
- Action
- Public Hearing

Division: Deputy Superintendent

Recommendation: Approve Rosemont High Field Trip to Houston, TX April 19-24, 2023

Background/Rationale: On April 19, thirteen students and three teachers will travel via commercial airline to Houston, TX for a STEM robotics competition involving 600 high schools from all around the world.

Financial Considerations: Funds for this trip will be paid by the After School Safety and Enrichment for Teens (ASSETs) grant.

LCAP Goal(s): College preparedness, increasing communication and critical thinking skills.

Documents Attached:

1. Out-of-state field trip documents

<p>Estimated Time of Presentation: N/A</p> <p>Submitted by: Lisa Allen, Deputy Superintendent Tuan Doung, Assistant Superintendent</p> <p>Approved by: Jorge A. Aguilar, Superintendent</p>
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Sacramento City Unified School District
FIELD TRIP REQUEST FORM
 (USE A SEPARATE FORM FOR EACH TRIP)

Parent Permission Form is required for each student field trip. See below reference distribution section for details concerning each type of trip.

School Name: **Rosemont High School (RHS ROBOTICS)**

Date: **03/16/23**

Teacher's Name: **David Stafford**

Room #: **Theater Shop**

Telephone #: **916-708-6219**

Field Trip Destination: **FIRST Robotics Championships, Houston, TX George R. Brown Convention Center**

Local-50 mile radius (bus/walking) Local-50 mile radius (driver led trips) Out-of-Town (Beyond 50 mile radius) (forward directly to Field Trip Office) Overnight Out-of-State/Country Involving Swimming or Wading Unusual Activities

Route: **Southwest flight from Sacramento International Airport to Hobby International Airport**

Educational nature of field trip/excursion: **STEM competition involving over 600 high school teams from all around the world. This is a special event because it is VERY difficult to qualify for regularly.**

Depart Date: **04/19/23**

Time: **5am**

Return Date: **04/24/23**

Time: **9:50am**

TRANSPORTATION will be provided by: Walking School Bus - contact Transportation Field Trip Office
 Charter Bus Company (certified): Yes No - Check with Field Trip Office

Private Vehicle/Parent Driver/Faculty Driver - Complete Volunteer Personal Automobile Use Form for each vehicle and driver, must have fingerprint clearance (check with Human Resources for fingerprint clearances) Public Transportation Train Commercial Airline Other: _____

Funding Source: **RHS Robotics, Rosemont 21st Century ASSETS** Financial Assistance Available? Yes No

Number of students participating: **13**

Adult Chaperones/Drivers: Use additional forms if more than 4 names

DRIVER

1) David Stafford yes no
 3) Joslah Sidhu yes no

DRIVER

2) Kim Stowell yes no

Teachers and Staff Attending: **N/A**

Principal Approval *Elizabeth Vigil* Date *3/23/23*

Risk Management Approval (Unusual Activities) *[Signature]* Date *3/31/23*

Instructional Assistant Superintendent Approval *[Signature]* Date *3/29/23*

Distribution: Refer to the Field Trip Information Form RSK 106F for the forms and distribution required for each trip:

1. Local Trip (school or charter bus): (50-mile radius) - Submit to Principal for approval. Maintain all documents at site and forward a copy to Instructional Assistant Superintendent for approval.
2. Local Trip: (50-mile radius: driver led) - Submit driver led trips to Principal for approval then forward to Instructional Assistant Superintendent for approval 6 weeks prior to trip.
3. Local Trip: (walking, RT, Amtrak): Submit walking trips to Principal for approval then forward to Instructional Assistant Superintendent for approval 2 weeks prior to trip.
4. Out-of-Town: (beyond 50-mile radius) - Submit to Principal for approval then forward to Instructional Assistant Superintendent for approval 6 weeks prior to trip.
5. Overnight Trip: Submit to Principal for approval then forward to Instructional Assistant Superintendent for approval 6 weeks prior to trip.
6. Trip Involving Swimming or Wading: Submit to Principal for approval then forward to Instructional Assistant Superintendent for approval 6 weeks prior to trip.
7. Trip Involving Unusual Activities (Water sports or high risk activities such as rafting, snorkelling, rock climbing, skiing, etc.) - Submit to Principal for approval then forward to Instructional Assistant Superintendent for approval 6 weeks prior to trip. This may require Special Event Liability Insurance.
8. Out-of-State/Country: Submit to Principal for approval then forward to Instructional Assistant Superintendent for approval 6 weeks prior to trip. Must have Superintendent, Board of Education and Risk Management approval prior to trip. Instructional Assistant Superintendent will place field trip item on Board Agenda. Trips not submitted to Segment Administrator 6 weeks prior to trip will be considered automatically rejected by the Board of Education.
9. Approved forms will be returned by Instructional Assistant Superintendent. Maintain a copy of all forms at site for 2 years
10. Venue/Destination: Must comply with SCUUSD COVID19 Mitigation Guidelines for all trips outside of district facilities.

Reviewed by Site Office Manager: _____ (Initials)




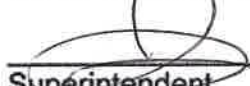
Sacramento City Unified School District
**OUT-OF-STATE OR OUT-OF-COUNTRY
TRAVEL REQUEST**

School Name ROSEMONT HS Date 1 / 1
Teacher's Name DAVID STAFFORD Room # N/A Telephone # 916-708-6219
Field Trip Destination FIRST CHAMPIONSHIP - HOUSTON TX
Reason for travel COMPLETE IN THE 2023 FIRST ROBOTICS
WORLD CHAMPIONSHIPS.

List unusual activities, water activities or high risk activities (examples: rafting, snorkeling, rock climbing, skiing, etc.) as a special parent waiver may be required. Submit copy of contract or waiver to Risk Management for review before signing. Attach a detailed itinerary for each day

Signed 
Teacher

Approvals:

 3/23/23
Principal Date
 3/31/23
Risk Management Dept. Date
 3/29/23
Segment Administrator Date
 3/28/23
Superintendent Date

1 / 1
Board Approval Date

NO COST to District

TRAVEL REQUEST FORM (ACC-F014)

Sacramento City Unified School District

Request to Attend: <input checked="" type="checkbox"/> Conference/Workshop <input type="checkbox"/> Business Meeting	Purpose for Attending: <input type="checkbox"/> Professional Development <input type="checkbox"/> Continued Education Credits Earned	Instructions: This form must be completed and received in Accounts Payable at least 30 days prior to the proposed trip- 60 days if out-of-state. REQ # _____
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School/Department ROSEMONT ROBOTICS Date 3-29-23

Date(s) of Event 4/19/23- 4/24/23 Location HOUSTON, TX

Event Title (attach brochure) FIRST ROBOTICS CHAMPIONSHIPS

Purpose* STEM COMPETITION

*(what value does this activity give students, attendees, staff, department/site or community?)

How does this travel align with the District's strategic plan? CTE / WBL & ACADEMIC SCHOLARSHIPS

How will this activity/event be used and shared? STUDENT/TEAM GROWTH, MULTIPLE SOCIAL SITES

Name of Attendee(s) <small>(attach sheet for additional attendees)</small>	Position	Substitute (Y/N)*	No. of Days Required	Budget Code (for substitute)
<u>DAVID STAFFORD</u>	<u>COACH</u>	<u>No N</u>		
<u>KIM STAVELL</u>	<u>MENTOR / CHAP.</u>	<u>No</u>		
<u>JOSIAH SIDHU</u>	<u>MENTOR / CHAP</u>	<u>No N</u>		
		<u>No</u>		
		<u>No</u>		

Additional Attendees Attached

**IF A SUBSTITUTE IS NEEDED, SEND A COPY OF THIS FORM TO PERSONNEL, BOX 770

Approvals:

E. Lopez 3/28/23
Principal/Department Head Signature & Print Name Date

L. Lee 3/28/23
Cabinet Level or Designee Signature Date

[Signature] 3/28/23
Chief Business Officer Signature Date

[Signature] _____
Superintendent or Designee Signature Date

District cost for all attendees (estimate)

Registration Fee *** _____

Meals included?

B L D

Lodging _____

Transportation _____

Meals _____

Other _____

TOTAL _____

Categorical Budget Code(s): _____ \$ _____

General Fund/Unrestricted _____ \$ _____

***If any meals are included in the cost of registration, how many of each: Breakfast _____ Lunch _____ Dinner _____

Prepayment Requested: All checks will be sent to the site/department unless prior arrangements have been made (with AP) to pick up check

	Requisition #	Dollar Amount
Registration Fee	_____	_____
Hotel	_____	_____
Airfare ****	_____	_____
Car Rental ****	_____	_____