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EDUCATIONAL SERVICES

Instruction
SCHOOL-SPONSORED TRIPS

E(4) 6153

San Leandro Unified School District
STUDY/FIELD TRIP APPROVAL FORM

Name of School: SLHS Date: 8/30/2013

SLHS DECA
Name of Group

Number of students: (males) TBA (females) ~~TBA~~ 4

Teacher(s): M. Styner, D. Maynard

Classes taken: Periods 1, 2, 3, 4, 5, 6 (if applicable) (circle)

Substitute need for: 1, 2, 3, 4, 5, 6 (if applicable) (circle)

Destination (Location): Atlanta, GA Atlanta Hilton

Address: 255 Courtland St NE Atlanta Ga 30303

Dates of Trip: Leave School: 5/2/2014 Time: 6:20 AM

Return to School: 5/7/2014 Time: 12:30 pm

Purpose of Trip: International DECA CDC

Chaperones Names: (males) TBA Derrick Lyons

Chaperones Names: (females) M Styner, D. Maynard

Types of transportation: ***(Appropriate forms must be completed.)***

Charter Bus: _____ Cost: _____
(See Business Services for current approved listing)

Private Car: _____ *(Students must have parent permission to drive and are not to drive outside the immediate area.)*
(Insurance form needed)

Other: AIR - Southwest Note Specifics: _____

All anticipated absence forms (if necessary), parent approval forms, medical forms, emergency phone numbers and other appropriate information must be submitted to the office of the Principal prior to departure.

Approval: _____ Date: 3/3/14
Signature of Principal

For Overnight Trips Only: _____ Date: _____
Signature of Superintendent or designee

Board Approval Date: _____ (If Applicable). If request is denied, reason(s) for denial: _____

E(4a) 6153 Study/Field Trip Checklist must accompany this form

San Leandro Unified School District
STUDY/FIELD TRIP CHECKLIST

(Must be submitted with Study/Field Trip Approval Form E(4) 6153)

Name of School: SLHS Name of Group: DECA

Contact Person: M Stiger, D Maynard Phone # 510 205-6115

Date of Trip: 5/3-5/7/2014 Location of Trip: Atlanta, GA

Please check the following requirements completed for which you are responsible to ensure students and staff a safe study/field trip:

- ☑ Arranged for substitutes (if applicable)
  If sub required, how will cost be covered? ROP
- ☑ Volunteer Requirements met
- ☑ Funding for trip
- ☑ Transportation
- ☑ Proof of Insurance for transportation
- ☑ Certificate of Insurance/Proof of Liability (for SLUSD or Organization) if required
- ☑ Required Chaperone Ratio (male and female)
- ☑ Signed Permission Slips
- ☑ Sleeping Arrangements (overnight/out-of-state trips):
  Type: _____