

Palisades Charter High School

REQUEST FOR APPROVAL OF SCHOOL-ORGANIZED TRIP FOR STUDENTS

Check the appropriate box: [X] Field Trip [] School Journey [] Curricular Trip [] Athletic Trip [] Curricular Buss Tour [] OTHER (Describe) _____

Name of School: Palisades Charter High School Employee Supervising trip _____ Certified _____ Non-Cert. _____ Telephone Number (310) 230-6623 Grade levels (Circle) 9 10 11 12 OTHER _____

- 1. Destination Oakland Marriott City Center Are admission fees charged? Yes x No
2. Dates of Trips 3/15-3/17 3. Number of Students 20 Number of adults 3
4. Name and employee number of employee who will go on trip: Brad Kolavo, Peyman Nazarian, David Carini
5. Substitute required? Yes x No How Many? 3 Source of funds
6. Time schedule required by school: Leave School Friday am 3/15 via Flight Arrive destination Friday 3/15
7. Duration of trip: Less than one day One day X Overnight X (if overnight, how many days?) 2
8. Method of transportation: School bus (indicate number required) Walking Automobile
Public Carrier: airplane x boat bus train other (explain)
9. Brief description of educational benefit to be derived from this activity. Please state specifically as an instructional objective (not required for athletic trips of Youth Services Activities) The students will participate in live competitions and student workshops. Also host a booth at the tradeshow.
10. Source of funds for trip

NOTE: It is illegal to charge students or parents for participation in any activity for which ADA will be taken.

- 11. Have the locations of the nearest emergency facilities been obtained? Yes No
12. Have forms for parent's or guardian's permission been obtained? Yes No
13. If hiking or camping activity:
a. Have the ranger, sheriff, police or other emergency personnel been notified of intent to be in the area? Yes No
b. Has the area been checked for potential hazards? Yes No
c. Has the School Police Department been notified of the trip? Yes No

APPROVALS:

Principal or Asst. Principal _____ Date: _____

Board of Trustees* _____ Date: _____

* ONLY TRIPS INVOLVING SITES NOT ON APPROVED LIST MUST BE PROCESSED THROUGH THE PALISADES CHARTER HIGH SCHOOL BOARD OF TRUSTEES.