

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: Kolavo/Nazarian Certified [X] Non-Cert.

Telephone Number: (310) 230-6623 Grade levels (Circle) 9 10 11 12 OTHER

1. Destination: Anaheim Marriott Are admission fees charged? Yes [X] No

2. Dates of Trips: 2/24 - 2/27 3. Number of Students: 52 Number of adults: 4

4. Name and employee number of employee who will go on trip: Brad Kolavo, Peyman Nazarian, Natasha Barrett, TBD

5. Substitute required? Yes [X] No How Many? 2 Source of funds: CTE

6. Time schedule required by school: Leave School 12pm 2/24 Arrive destination 2/24 - 2pm Leave destination 2/27 11:30pm Return school 2/27 1pm

7. Duration of trip: Less than one day One day [X] Overnight (if overnight, how many days?) 3

8. Method of transportation: School bus (indicate number required) Walking Automobile Public Carrier: airplane boat [X] 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 attend the California State Career Development Conference

10. Source of funds for trip: CTE / ASB trust

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 [X] No

12. Have forms for parent's or guardian's permission been obtained? Yes [X] 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.

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: NEWBIU / SHARFI Certified Non-Cert. Telephone Number: (310) 230-6623 Grade levels (Circle) 9 10 11 12 OTHER _____

1. Destination: CIMI TOYON BAY CAMP CATALINA Are admission fees charged? Yes [X] No [] 2. Dates of Trips: MARCH 2-4, 2022 3. Number of Students: 100 Number of adults: 10 4. Name and employee number of employee who will go on trip: NEWBIU & SHARFI

5. Substitute required? Yes [X] No [] How Many? 2 Source of funds: TRUST ACCT. 6. Time schedule required by school: Leave School 6:30 AM 3/2/22 Arrive destination 7:30 AM Leave destination 3:00 PM 3/4/22 Return school 4:30 PM 3/4/22 FERRY SHUTTLE 7. Duration of trip: Less than one day [] One day [] Overnight [X] (if overnight, how many days?) 3 8. Method of transportation: School bus (indicate number required) 3 Walking [] Automobile [] Public Carrier: airplane [] boat [X] 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 MARINE BIO. CAMP OVERNIGHT

10. Source of funds for trip PARENT PAYMENTS

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 [X] No [] 12. Have forms for parent's or guardian's permission been obtained? Yes [X] 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 [Signature] 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.