

Palisades Charter High School

REQUEST FOR APPROVAL OF SCHOOL-ORGANIZED TRIP FOR STUDENTS

Check the appropriate box: ☐ Field Trip ☐ School Journey ☐ Curricular Trip ☒ Athletic Trip
☐ Curricular Buss Tour ☐ OTHER (Describe) _____

Name of _____ Employee _____ Certified 1
 School: **Palisades Charter High School** Supervising trip NANCE Non-Cert. 6
 Telephone Number (310) 230-6623 Grade levels (Circle) 9 10 11 12 OTHER _____

1. Destination SAGE HILL (SANTA BARBARA) Are admission fees charged? Yes _____ No X
2. Dates of Trips 11/4-6 3. Number of Students 60 Number of adults 10
4. Name and employee number of employee who will go on trip: NANCE, AMIS, TATRO
5. Substitute required? Yes _____ No X How Many? _____ Source of funds _____
6. Time schedule required by school: Leave School 12:30 Arrive destination 2:30
 Leave destination 10:00 Return school 12:00
7. Duration of trip: Less than one day _____ One day _____ Overnight X (if overnight, how many days?) 2
8. Method of transportation: School bus (indicate number required) _____ Walking _____ Automobile X
 Public Carrier: airplane _____ 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 work out and bond
The team will come together to prepare for the upcoming season.
10. Source of funds for trip Donations

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 X No _____
 - b. Has the area been checked for potential hazards? Yes X No _____
 - c. Has the School Police Department been notified of the trip? Yes X No _____

APPROVALS:

Principal or Asst. Principal Pam Maguire Date: 10/14/22

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: ☐ Field Trip ☐ School Journey ☐ Curricular Trip ☐ Athletic Trip
☐ Curricular Buss Tour ☒ OTHER (Describe) JSA Fall State Conference

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

1. Destination Sheraton Gateway LAX Are admission fees charged? Yes ☒ No _____
 2. Dates of Trips November 12-13, 2022 3. Number of Students 20 Number of adults 2
 4. Name and employee number of employee who will go on trip: Mr. David Pickard

5. Substitute required? Yes _____ No ☒ How Many? NA Source of funds Students
 6. Time schedule required by school: Leave School NA Arrive destination 8:00 am
 Leave destination 10:00 p.m. Return school NA

7. Duration of trip: Less than one day _____ One day _____ Overnight ☒ (if overnight, how many days?) 2 days
 8. Method of transportation: School bus (indicate number required) _____ Walking _____ Automobile ☒
 Public Carrier: airplane _____ boat _____ bus _____ train _____ other _____ (explain) Parents
will drop off and pick up students from the hotel and check-in/check out with Mr. Pickard

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 engage with keynote speakers, debate in political discussions, participate in thought-talks, and evening activities.

10. Source of funds for trip JSA Scholarship Funds + Family Contributions

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 Pam Magee Date: 10/14/22

Board of Trustees* _____ Date: _____

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