Palisades Charter High School

REQUEST FOR APPROVAL OF SCHOOL-ORGANIZED TRIP FOR STUDENTS

Check the appropriate box: Field Trip Curricular Buss Tour OTHER (Desc		Curricular Trip	Athretic Tri
Name of School: Palisades Charter High School		Non	ified -Cert
Telephone Number (310) 230-6623	Grade levels (Circle) 9 10 11 12	OTHER	-
1. Destination COUNCIL CAMPER	OUND Are admission fees charg	ed? Yes N	Vo
2. Dates of Trips 10 27 - 29	3. Number of Students	SO Number of adults	<u>e</u>
4. Name and employee number of employee who	o will go on trip: <u>Nance,</u>	Anus, Tatro	
5. Substitute required? Yes No 6. Time schedule required by school: Leave School Leave destination	How Many?	Source of funds dna Arrive destination 3:0	has
7. Duration of trip: Less than one day One d	av Overnight (if overni	ght, how many days?)	nights
8. Method of transportation: School bus (indicate Public Carrier: airplane boat	number required) Walking bus train	Automobile Other (6	explain)
9. Brief description of educational benefit to be d required for athletic trips of Youth Services Ac	tivities) The students will <u>Pov</u>	a, Tain, an	<u>a</u>
10. Source of funds for trip	つ ,		
NOTE: It is illegal to charge students or paren			
11. Have the locations of the nearest emergency facilities been obtained? Yes			
12. Have forms for parent's or guardian's permiss	ion been obtained? Yes	/ No	
13. If hiking or camping activity:			
a. Have the ranger, sheriff, police or other Yes No	emergency personnel been notified o	f intent to be in the area?	
b. Has the area been checked for potential	al hazards? Yes	No	
c. Has the School Police Department bee	n notified of the trip? Yes	No	
APPROVALS:			
Principal or Asst. Principal		Date:	

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