Dr. Magee	
Submit by Email	Print

Palisades Charter High School REQUEST FOR APPROVAL OF SCHOOL-ORGANIZED TRIP FOR STUDENTS

Check	ck the appropriate box:	urney	Athletic Trip		
Name	e of Employee ol: Palisades Charter High School Supervising trip Jeanne	Saiza and Peymon Nazarian			
Telepl	ohone Number (310) 230-6623 Grade levels (Circle) 9 1	0 11 12 OTHER <u>all</u>			
1.	Destination Marriot Warner Center Are admission	fees charged? Yes x	No		
2.	Dates of Trips 2/24-2/25 2018 3. Number of S	Students 22 Number of adults	2		
4.	Name and employee number of employee who will go on trip: see above	9			
5.	Substitute required? Yes No × How Many?	Source of funds_studer	nts		
6.	Time schedule required by school: Leave School n/a Leave destination 2:00 PM Return school n/a	Arrive destination 8:00	AM		
7.	Duration of trip: Less than one day One day Overnight x	(if overnight, how many days?)1	night 2 da		
8.	Method of transportation: School bus (indicate number required) W Public Carrier: airplane boat bus no student drivers permitted at this event	alkingAutomobile × train other	(explain)		
9.	Brief description of educational benefit to be derived form this activity. P required for athletic trips of Youth Services Activities) The students were also according to the students with the students were also according to the students with th	IIII depate and create legislative	Dillo		
10.	Source of funds for trip Students and Boaster				
	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? Ye	es x No_			
12.	Have forms for parent's or guardian's permission been obtained? Ye	s <u>x</u> No_			
13.	If hiking or camping activity:				
	a. Have the ranger, sheriff, police or other emergency personnel bee				
	 b. Has the area been checked for potential hazards? Yes not the trip? Yes c. Has the School Police Department been notified of the trip? Yes 	No			
4.00	PROVALS:				
Princ	cipal or Asst. Principal Jam Mage	Date://	18/18		
Boar	PROVALS: cipal or Asst. Principal	Date:			
_001	To Table and produces and the Contract of the				

^{*} ONLY TRIPS INVOLVING SITES NOT ON APPROVED LIST MUST BE PROCESSED THROUGH THE PALISADES CHARTER HIGH