

OVERNIGHT CURRICULAR OR CO-CURRICULAR TRIP REQUEST

NOV 17 2023

BY: _____

Part 1: For out-of-state request for preliminary Board approval. (This request should be submitted to the Board of Trustees a minimum of six (6) months in advance of the departure date. Part 2 of this request must be submitted as before. Both parts require board approval.)

Requestor: Guanhua Ye School: Mountain View HS Department/Group: MVHS Scioly team

Destination: Michigan State University, MI Mode of Transportation: Airplane

Departure Day and Date, e.g. Monday, August 1, 2016 through Thursday, August 11, 2016)

Thursday May 23, 2024 through Sunday May 26, 2024

Number of instructional days missed: 2 Estimated # of students: 19

Person or organization responsible for the organization of the trip: MVHS Science Olympiad team

We request that this application for preliminary approval be placed on the Board Agenda for

December 18, 2023 (Board Meeting Date)

Staff Advisor: Anthony Gallego 11-7-23

Requestor: Guanhua Ye Guanhua Ye Date: 11/06/2023

Department Coordinator: [Signature] Date: 11/6/23

Principal: [Signature] Date: 11/13/23

Associate Superintendent: [Signature] Date: 11-27-23

Received in Ed Services on 11/17/2023 by graelcasiano

(The request must be received in Ed Services at least two weeks in advance of the board meeting date)



MOUNTAIN VIEW-LOS ALTOS UNION HIGH SCHOOL DISTRICT
1299 BRYANT AVE., MOUNTAIN VIEW, CA 94040-4599

RECEIVED
NOV 17 2023

PART 2: OVERNIGHT CURRICULAR OR COCURRICULAR TRIP REQUEST

Requested by: Guanhua Ye Department: MVHS Scioly team
School: ☒ Mountain View HS ☐ Los Altos HS ☐ Alta Vista HS
Destination (out of state trips require Board approval): Michigan State University, MI
Mode of Transportation: ☒ Air ☐ District Bus/Van ☐ Chartered Bus ☐ Car ☐ Other _____
Date and Time of Departure: May 23, 2024 Date and Time of Return: May 26, 2024
Number of instructional days that students will be missing: 2
What provision has been made for students to make up missed classes and assignments? Students will contact teachers to make up assignments and missed class time.
Number of Participants: 19 students 19 parents 1 teachers _____ others
Objectives of the Trip (educational value): Demonstrate knowledge of advance science and engineering topics through collaborative inquiry.
Total cost of trip per student (include all expenses): \$ 1000.00
Fund raising activities and amount you expect to raise to offset cost to students (Please show by how much your fund raising will reduce the expenses per student): None planned at this time.

Amount student is expected to pay from personal sources after applying fund raising share: \$ 1000.00

☛NOTE: In the event of a trip delay due to unforeseen circumstances, e.g., natural disasters, the district is not liable to pay the additional room, board and transportation costs associated with a prolonged stay overseas or out of state. Parents are highly encouraged to purchase Travel Insurance to prepare for the possible, though unlikely occurrence of such an event. In the absence of such insurance, parents are fully liable for any additional expenses.

What arrangements will be made to subsidize the student? None

☛NOTE: No student can be excluded from a trip because of inability to pay.

Facilities for lodging (if a hotel, name and address): TBD

Names of trip supervisor(s): Guanhua Ye/Shivkumar Krishnan/Joe Dias

Number of substitutes needed (Personnel must be notified if trip/substitutes are cancelled): 0


Department Coordinator's Signature

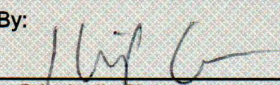
11/7/23
Date

THIS SECTION TO BE COMPLETED BY PRINCIPAL'S OFFICE AND EDUCATIONAL SERVICES DEPARTMENT

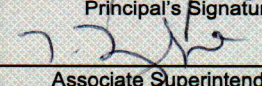
In
Received Progress Completed N/A

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Parental Permission for Field Trip |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Field Trip Agreement for Chaperones |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Emergency Medical Treatment Card |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Field Trip Checklist |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Volunteer Driver - Application for Approval & applicable Parental Permission form |

Approved By:


Principal's Signature

11/13/23
Date


Associate Superintendent's Signature

11-27-
Date