

RECEIVED
FEB 11 REC'D
BY: _____

OVERNIGHT CURRICULAR OR CO-CURRICULAR TRIP REQUEST

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: Wyn Schuh School: MVHS Department/Group: Robotics

Destination: Houston, Tx Mode of Transportation: Airplane

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

Wed April 20, 2022 - Sunday April 24, 2022

Number of instructional days missed: 3 Estimated # of students: ~40

Person or organization responsible for the organization of the trip: Wyn Schuh
MVHS Robotics

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

March 7
Feb 11, 2022 (Board Meeting Date)

Requestor: Wyn Schuh Date: Feb 2, 2022

Department Coordinator: _____ Date: _____

Principal: [Signature] Date: 2-15-2022

Associate Superintendent: [Signature] Date: 2-18-22

Received in Ed Services on Feb. 11, 2022 by Grace Icasiano

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

PART 2: OVERNIGHT CURRICULAR OR COCURRICULAR TRIP REQUEST

Requested by: Wyn Schuh Department: Robotics Team

School: Mountain View HS Los Altos HS Alta Vista HS

Destination (out of state trips require Board approval): Houston, TX

Mode of Transportation: Air District Bus/Van Chartered Bus Car Other _____

Date and Time of Departure: 7am 4/20/22 Date and Time of Return: 8pm 4/24/22

Number of instructional days that students will be missing: 3

What provision has been made for students to make up missed classes and assignments? Students will communicate with teachers prior to trip

Number of Participants: 40 students 10 parents 0 teachers 7 others (mentors)

Objectives of the Trip (educational value): To attend the FIRST robotics competition - Championship event in Houston TX

Total cost of trip per student (include all expenses): \$ 800

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): Scholarships are available for all students who need financial support

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

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? Scholarships

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

Facilities for lodging (if a hotel, name and address): TBD if we qualify to attend

Names of trip supervisor(s): Wyn Schuh, Stephan Massalf

Number of substitutes needed (Personnel must be notified if trip/substitutes are cancelled): none

Wyn Schuh
Department Coordinator's Signature

1/29/2022
Date

THIS SECTION TO BE COMPLETED BY PRINCIPAL'S OFFICE AND EDUCATIONAL SERVICES DEPARTMENT			
Received	Progress	Completed	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Approved By: [Signature] 2-15-2022
Principal's Signature Date

[Signature] 2-18-22
Associate Superintendent's Signature Date



HIGH SCHOOL DISTRICT

Mountain View-Los Altos Union High School District
1299 Bryant Avenue, Mountain View, CA 94040-4599

FIELD TRIP CHECKLIST

Teacher Name: Wyn Schuh Representing which Class or Group? Robotics Team
Purpose of Trip: Attending Robotics Championship Event in Houston TX
Proposed Date of Trip: 4/20-4/22/20 Departure Time: morning Return Time: evening - Times vary
Number of Students: 40 Cost of Trip per student: 178.00

DAY TRIPS

This form must be completed a full two weeks prior to the departure of the field trip. Completed forms must be returned to the principal's administrative assistant for the principal's review prior to placement on the field trip calendar.

- Attach a copy of the Parental Permission for Field Trip form that you will distribute to students with the information box completely filled out.
Number of Chaperones:

OVERNIGHT TRIPS:

Overnight trips must be filed with the principal's office at least two weeks prior to the commencement of the trip and approved by the principal and the Associate Superintendent of Educational Services. Out-of-state and out-of-country trips require School Board approval and must be submitted to the Board of Trustees a minimum of six months prior to the departure date.

- Complete the Overnight Curricular or Co-Curricular Trip Request form and turn it in with this application. Be sure to check the "Forms Completed" boxes.
Number of Chaperones: 2 (Overnight trips with students of mixed gender must have at least one chaperone of each gender.)

TRANSPORTATION: Check the box indicating that you have completed the appropriate forms.

- Traveling by private vehicle
Drivers must complete the personal auto insurance verification form, "Volunteer Driver - Application for Approval"
Parents of students being transported must complete the appropriate permission forms
Transportation Request (if traveling by bus)
Transportation costs will be covered by:

FIELD TRIP ROSTER:

- Field trip rosters must be submitted to the Attendance Office at least two days prior to departure with parental permission forms attached. (Checking this box indicates your assurance that this step will be completed.)
Teacher submitting roster: Date:

MEETING WITH STUDENTS:

- A meeting with students, chaperones, and parents is required for Overnight and Out-of-state trips only. Checking this box indicates that meeting was held, or is scheduled to be held and an administrator has, or will be present. (Please keep a sign-in sheet for your records.)
Date of meeting:

FIELD TRIP AGREEMENT FOR CHAPERONES:

- Checking this box verifies that the staff member responsible for this trip has collected signed and dated chaperone agreements from every adult who is accompanying the students on this trip.

Reviewed by: [Signature] (Principal) Date: 2-3-2022



Mountain View-Los Altos Union High School District
1299 Bryant Avenue, Mountain View, CA 94040-4599

PARENTAL PERMISSION for FIELD TRIP

- Day Trip only
- Overnight Trip
- Out-of-State Trip

Permission for your son/daughter to participate in a field trip is requested. The pertinent information is as follows:

School: Mountain View HS
 Class: Robotics Club
 Teacher: Wyn Schuh
 Destination of field trip: Houston, TX - GRB Convention Center
 Purpose: Attend the FIRST Championship Event
 Date and time of departure: 4/20/22 morning
 Number of students who will attend: ~40
 Mode of transportation: Airplane
 Nature of lodging: Hotel's
 Cost to each student: ~\$800 Purpose: Airfare, Hotel, Food
 Names of supervisors: Wyn Schuh, Stephan Massalt

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.

X -----

I give my permission for my son/daughter _____ to attend the field trip described above. I furthermore authorize the supervisor to take responsibility for securing emergency first aid or medical aid if either is required by my son/daughter. **I have read the Code of Conduct printed on the back of this form, and discussed behavioral expectations and the consequences for not meeting those expectations with my student.**

X _____
(Parent/Guardian's signature)

X _____
(Student's signature)

NOTE: If district-owned transportation is being used, the school district's insurance policy covers bodily injury and property damage liability. All drivers of non-district owned vehicles are asked to furnish evidence of automobile insurance liability coverage.

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