

MANHATTAN BEACH UNIFIED SCHOOL DISTRICT
OVERNIGHT FIELD TRIP REQUEST FORM

Name of Person Requesting Approval: Wayne Knutson Your Position: Teacher
Your Location/School Site: Mira Costa Your Work Telephone: X5176

Name/Grade Level(s) of Class Participating: 9, 10 & 12

Dates of Travel: from 5/15/2015 to 5/17/2015

Name of Destination: Davis Model United Nations Conference

Destination Address: University of California, Davis; Davis, CA

Destination Phone Number: _____

Name of Contact Person at Destination: Alexandra Armocost

Reason for Travel/Educational Goal: Model UN Competition

Number of Students Attending: Male: 20 Female: 20

*Number of Chaperones: Male: 2 Female: 2

Complete Name and Phone Number of Each Chaperone (use additional page if necessary):

1. Wayne Knutson 310-908-4154
2. Deborah Knutson
3. Robert Timberlake
4. Karen Timberlake
5. _____

A Completed and signed *Chaperone Guidelines Agreement* for each chaperone must be attached to this request form upon submission to the Board of Trustees. *There must be a minimum of two adult chaperones (one male and one female), unless all travelers are of the same gender. There must be one adult chaperone for each 10 students of the same gender. If the trip involves water activities, the ratio of chaperones shall be revised to ensure closer supervision of elementary grade students appropriate to their age.

Name of Travel Agency: N/A Contact: _____

(Proof of Insurance must accompany this form.)

Address: _____ City/State/Zip/Phone: _____

Method of Transportation (be specific): Southwest Air to Sacramento, Bus to and from hotel.

Name and Address of Hotel (be specific): Hallmark Inn, 110 F Street, Davis, CA

How Many Days of School Will Be Missed? 1 List School Dates Missed: 5/15/2015

Will Student Participate in Water Sports, Rock Climbing or Other Hazardous Activities? Yes

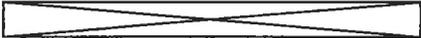
If so, what type? Whitewater rafting

Will scholarships be provided? Yes Will any cost (including sub costs) be borne by the district? No If so, why? _____

Account Number to be Charged: _____

Board approval must be obtained before any deposits are made. Please submit your request at least 3-4 months in advance of the travel. The Board will not approve travel when the request form is incomplete. If you have additional information, please attach it to this request form. This form must be signed by the principal and the Executive Director-Educational Services prior to being submitted to the Superintendent's Office.

Signatures:

Your Signature:  Principal: _____

Exec. Dir, Ed. Svcs:  Clerk, Board of Trustees: _____

Exhibit

version: May 21, 2008

MANHATTAN BEACH UNIFIED SCHOOL DISTRICT
Manhattan Beach, California