

E6153

MANHATTAN BEACH UNIFIED SCHOOL DISTRICT OVERNIGHT FIELD TRIP REQUEST FORM

Name of Person Requesting Approval: Kim Llnz Your Position: Principal
Your Location/School Site: Pacific Your Work Telephone: 310-546-8044

Name/Grade Level(s) of Class Participating: 5th grade - Pacific
Dates of Travel: from April 1, 2015 to April 3, 2015
Name of Destination: Catalina Institute of Marine Science
Destination Address: 1 Toyon Bay Avalon, CA 90704
Destination Phone Number: 310-510-1622
Name of Contact Person at Destination: Kayla Furmanek
Reason for Travel/Educational Goal: Outdoor educational component to science curriculum
Number of Students Attending: Male: 63 Female: 63
*Number of Chaperones: Male: 9 Female: 9

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

1. Stephanie Hubbard
2. Michele Krzmarzick
3. Heather Tuttle
4. Susan Stelter
5. Paula Goldberg

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: CIMI Institute Contact: Kayla Furmanek
(Proof of Insurance must accompany this form.)
Address: 1 Toyon Bay Avalon, CA 90704 City/State/Zip/Phone: 310-510-1622

Method of Transportation (be specific): bus / boat
Name and Address of Hotel (be specific): Catalina Emerald Bay Camp
How Many Days of School Will Be Missed? 3 List School Dates Missed: April 1,2,3
Will Student Participate in Water Sports, Rock Climbing or Other Hazardous Activities? yes
If so, what type? snorkeling, hiking
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: [Signature] Principal: [Signature]

Exec. Dir, Ed. Srvs : [Signature] Clerk, Board of Trustees: _____

Exhibit

version: May 21, 2008

MANHATTAN BEACH UNIFIED SCHOOL DISTRICT
Manhattan Beach, California

Wallis Valleca
George Elias
Oren Banami
Alex Virtue
Chris Velvin
Ian Tynan
Will Wood
Kevin Daley
Jeremiah Bogert

Leigh Anne Lynch
Amy Zisette
Jess Pickard
Tracey Farrell