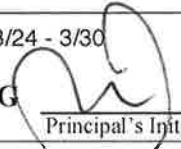


SAN MARINO UNIFIED SCHOOL DISTRICT  
APPLICATION FOR APPROVAL TO CONDUCT  
MULTI-DAY OVERNIGHT AND/OR OUT-OF-STATE/COUNTRY FIELD TRIP  
(AT LEAST THREE TO SIX MONTHS BEFORE DEPARTURE DATE)

(Exceptions to timeline must be approved in advance by the Assistant Superintendent of Instructional Services)

To: Board of Education San Marino Unified Date: 9/28

The undersigned for SAN MARINO HIGH SCHOOL School hereby applies for approval to conduct a field trip to SARASOTA FLORIDA Date: 3-24

|  |  |
|--|--|
| 1. Inclusive dates of trip: <u>3/24 - 3/30</u><br><b>NOT DURING TESTING</b><br>(✓) Itinerary attached<br>Principal's Initials   | 2. Purpose of trip:<br><br>(✓) Paragraph attached describing educational value and specific activities students will be required to complete |
| 3a. Membership of Group: <u>VARSITY BASEBALL TEAM</u><br>(e.g., U.S. History class, choral group)  | 3b. Number of Students Attending: <u>18 max</u><br><br>Boys: 18 Girls:   |
| 4a. Cost of trip financed by: <u>INDIVIDUALS&amp;BOOSTERS</u><br>4b. Name of travel agency contracted for trip:<br>(professional travel organization is required)<br><u>TRAVEL TEAM USA</u><br>4c. Cost per student:<br>(no student will be excluded from a required trip due to a lack of funds.) <u>\$1500.00 est.</u><br>( ) Attached student(s) name and verify funding source | 4d. Describe fundraising activities, if any:<br><br>Attachment(s), if any <u>NA</u>  |
| 5a. Name of certificated employee(s) in charge of trip:<br><u>Mike Hobbie</u><br>Responsible for coordinating fundraising, organization, and supervision while students are on SMUSD – sponsored trip  | 5b. Names of staff members who will provide supervision of students:<br><u>Mike Hobbie / Suzanne Hobbie / Matt Hobbie / Mike Thompson</u>    |
| 5c. Attach names of authorized chaperones on <b>FORM #1</b><br>(include relationship to students and/or school)  | 5d. Student/Chaperone ratio:<br>(see attached <b>FORM #1</b> )<br><u>4/18</u>  |

This application, together with the necessary documents, must be sent to the Assistant Superintendent of Instructional Services at least three months in advance (unless an exception to timeline is granted).

The undersigned applying for approval of the field trip will ensure conformance with all requirements of San Marino Unified School District procedures for field trips out-of-state, to foreign countries and/or involving multiple days.

Endorsed with Approval:

M. Hobbie  
(Field Trip Coordinator's Signature)

9/27  
(Date)

(Principal's Signature)

10/17/17  
(Date)

(Assistant Superintendent of Instructional Services Signature)

10/24/17  
(Date)

Endorsed with Approval

BOARD APPROVAL DATE:

**San Marino Unified School District**  
**MULTI-DAY OVERNIGHT AND/OR OUT-OF-STATE/COUNTRY FIELD TRIP**

Form #1

**SCHOOL:** SMHS **SPONSORING GROUP:** VARSITY BASEBALL  
**ACTIVITY:** BASEBALL TOURNAMENT **DATE(S):** 3/24-3/30

**DESTINATION:** SARASOTA FLORIDA

Please attach flyer or printed information pertaining to Study Trip.

**Number of Students:** 18 Attach list of student names and gender

**Submit 3 days before trip to appropriate Site Administrator**

**Number of Chaperones:** 4 List chaperones names below and indicate gender [M or F], attach pages as needed

For Retirees indicate date retired

| Certificated District Chaperones | M | F | Training Completed |
|----------------------------------|---|---|--------------------|
| MIKE HOBBIE                      | X |   | YES                |
| SUZANNE HOBBIE                   |   | X | YES                |
|                                  |   |   |                    |
|                                  |   |   |                    |
|                                  |   |   |                    |
|                                  |   |   |                    |
|                                  |   |   |                    |
|                                  |   |   |                    |
|                                  |   |   |                    |
|                                  |   |   |                    |

| Classified District Chaperones | M | F | Training Completed |
|--------------------------------|---|---|--------------------|
| MATT HOBBIE                    | X |   |                    |
| MIKE THOMPSON                  | X |   |                    |
|                                |   |   |                    |
|                                |   |   |                    |
|                                |   |   |                    |
|                                |   |   |                    |
|                                |   |   |                    |
|                                |   |   |                    |
|                                |   |   |                    |
|                                |   |   |                    |

| Non-District Chaperones | M | F | Training Completed |
|-------------------------|---|---|--------------------|
| TBD                     |   |   |                    |
|                         |   |   |                    |
|                         |   |   |                    |
|                         |   |   |                    |
|                         |   |   |                    |
|                         |   |   |                    |
|                         |   |   |                    |
|                         |   |   |                    |
|                         |   |   |                    |
|                         |   |   |                    |

**TRANSPORTATION**

**Commercial Carriers:** Yes or No: UNITED AIRLINES - Enterprise Rentals (ground transportation) 4 (7) passenger mini vans  
 (Examples: bus, plane, ferry, taxi, shuttle) (All buses must be CHP approved as SPAB, verify with SMUSD Transportation Department)

**Private Vehicles:** *DMV Report & Insurance Verification. Attach copy of completed forms and Parent/Guardian to sign Transportation Waiver Form for each student:* Yes    No   

**FUNDING**

Individual Students: Yes x No   

Donations: Yes    No x

Fundraisers: Yes    or No x Name of Fundraiser na

Others:  

Chaperones expenses to be paid by: ☒ Funding indicated above ☒ Individual Chaperones

**CHARGE OR BILL MANDATORY STUDENT TRIP LIABILITY INSURANCE TO:**

District Office staff in accordance with Board of Education Policy 3541.1(c) will obtain liability/insurance coverage.

In State    Out of State    Out of Country   

Others:  

**When submitting field trip invoices for payment (includes deposits) attach a copy of this form and board item.**

Please submit all approved paperwork at least 3 weeks prior to Board Date.

Please route (1) copy of this form to Human Resources Dept.  
 Submit to Assistant Superintendent of Instructional Services





**San Marino Unified School District  
FIELD TRIP COORDINATOR'S CHECKLIST  
FOR MULTI-DAY OUT OF STATE FIELD TRIPS**

School: SAN MARINO HIGH SCHOOL

Dates of Trip: 3/24-3/30

Trip Destination: SARASOTA FLORIDA

**To be completed by field trip coordinator in charge of the field trip**









| Date Completed | Initials  | <b>THREE MONTHS PRIOR TO TRIP</b><br><br><b>Exceptions to timeline must be approved in advance by the Assistant Superintendent of Instructional Services.</b>   |
|----------------|---|---|
| 10/6/17        |   | 1. Secure principal's tentative approval to conduct field trip (and approval to conduct fundraising, if applicable). <b>Send form Application for Approval to Conduct Multi-Day and/or Out-of State</b> to the site administrator in charge of field trips.   |
| 10/6/17        |    | 2. Review procedure for fundraising and develop plan to include: a) description of fundraising activities, b) plans to assist students who are unable to pay their own expenses, c) a written statement that no student will be excluded from a required trip due to lack of funds, and d) that funds will be returned to the school if not used for the trip.      |
| 10/6/17        |   | 3. Select the travel agency to be used (if appropriate). Have travel agency complete "Compliant Form for Sellers of Educational Travel" and forward to the site administrator in charge of field trips.   |
| 10/6/17        |  | 4. Obtain and submit copy of itinerary. This itinerary shall include a) dates ( <b>not during testing</b> ), b) locations (city, state, country) and c) accommodations. <b>Attach itinerary</b>   |
| 10/6/17        |  | 5. Arrange for chaperones, if appropriate. Provide chaperones with guidelines to complete Volunteer Application and on-line training module no later than, date _____. Ensure chaperones have completed chaperone training and agree to comply with all states and District laws, rules, and regulations.<br>Provide list to Principal and secure his/her approval. |
| NA             |   | 6. If academic competition is involved, submit to Principal for approval: a) Written criteria and guidelines used to select participants in academic competitions, and b) copies of written communications used to inform parents and students of the academic competition and of the governing guidelines.   |
|                |   | 7. Send home request for parental approval of student participation. If parent does not sign student cannot go.   |
|                |   | 8. Verify insurance coverage to provide personal medical insurance for participating students where required.   |
| 10/6/17        |   | 9. Secure trip cancellation insurance from travel agency where required.  |
|                |   | 10. Notify parents of other insurance coverage available as an option.  |

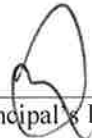


|  |  |   |
|--|--|---|
|  |  | 11. Provide written evidence of financial ability to cover travel and living expenses for all participants while outside of San Marino.   |
|  |  | 12. Verify that permission forms and waivers are returned for all students participating on a field trip. Verify alternate arrangements at school for those students not participating. |

| <b>Date Completed</b> | <b>Initials</b> | <b>THREE WEEKS PRIOR TO FIELD TRIP</b><br><br><b>Exceptions to timeline must be approved in advance by the Assistant Superintendent of Instructional Services.</b> |
|-----------------------|-----------------|--|
|                       |                 | 13. Field trip coordinator develops orientation plan for students, parents, and chaperones.  |
| NA                    |                 | 14. Arrange for participating students to be excused from other classes.   |
| NA                    |                 | 15. Arrange for first-aid kit and/or snake-bite kit, and ensure they are taken on trip.  |

| <b>Date Completed</b> | <b>Initials</b> | <b>ONE WEEK PRIOR TO FIELD TRIP</b><br><br><b>Exceptions to timeline must be approved in advance by the Assistant Superintendent of Instructional Services.</b>  |
|-----------------------|-----------------|--|
|                       |                 | 16. Report to principal's designee the names of all persons ( <b>adults and students</b> ) who will actually go on the trip. Provide list of students to verify those actually participating prior to departure. |
|                       |                 | 17. File this form with other required papers in school office.<br>(Records must be kept for three years.)   |

**San Marino Unified School District**  
**PRINCIPAL'S CHECKLIST**  
**MULTI-DAY AND/OR OUT-OF-STATE/COUNTRY**  
**FIELD TRIPS**

|  |   |                         |
|--|---|-------------------------|
| <b>1. Approval for Field Trip:</b> I have reviewed the plan for the field trip to<br>Sarasota Florida (Varsity Baseball) on <b>3/24-3/30</b><br>(not during testing) and I give tentative approval for the students to participate.  | <br>Principal's Initials   | <b>10/17/17</b><br>Date |
| <b>2. Approval for Field Trip Fund-Raising:</b> I have reviewed the plan for fundraising for this field trip and give my approval for fundraising activities to begin.   | <br>Principal's Initials   | <b>10/17/17</b><br>Date |
| <b>3. Lack of Funds:</b> To help students in need of funds, the following actions are being taken:<br>The Baseball Booster Club will pick up the costs.  | <br>Principal's Initials   | <b>10/17/17</b><br>Date |
| <b>4. Return of Funds:</b> Any funds not used for the trip will be returned in the following way:<br>To the Baseball Booster Club President  | <br>Principal's Initials   | <b>10/17/17</b><br>Date |
| <b>5. Chaperones:</b> An approved list of chaperones is on file in the main office of the school. <b>(FORM #1)</b>   | <br>Principal's Initials  | <b>10/17/17</b><br>Date |
| <b>6. Academic Competition Trips Only:</b> I certify that written criteria, guidelines and other communication to parents and students related to the competition are on file in the main office of the school.  | <br>Principal's Initials | <b>10/17/17</b><br>Date |
| <b>7. Insurance:</b> I certify that each and every student participating in the field trip has personal medical insurance and trip cancellation insurance, if applicable.  | <br>Principal's Initials | <b>10/17/17</b><br>Date |
| <b>8. Travel and Living Expenses:</b> Provision has been made for coverage of all expenses while outside of San Marino. This includes airfare, ground transportation, hotels, tours, and meals. Written evidence of this coverage is on file in the main office of the school. | <br>Principal's Initials | <b>10/17/17</b><br>Date |

|   |   |                         |
|---|---|-------------------------|
| <b>9. Contribution of Services:</b> Statement of Acknowledgment and Consent to Conditions of trip are on file at the following location at the school site:   | <br>_____<br>Principal's Initials | <u>10/17/17</u><br>Date |
| <b>10. Authorization for Student Participation:</b> For each and every student participating in the field trip there is a <i>Permission to Participate, Notification of Insurance, Waiver of Claims, and other Release Forms</i> on file in the main office of the school.<br><br>File title, if appropriate: _____ | <br>_____<br>Principal's Initials  | <u>10/17/17</u><br>Date |
| <b>11. Forward</b> this completed form to the Assistant Superintendent of Instructional Services.   | <br>_____<br>Principal's Initials  | <u>10/17/17</u><br>Date |

## **VARSIY BASEBALL SPRING BREAK TOURNAMENT FLORIDA TRIP**

Review procedure for fundraising and develop plan to include: a) description of fundraising activities, b) plans to assist students who are unable to pay their own expenses, c) a written statement that no student will be excluded from a required trip due to lack of funds, and d) that funds will be returned to the school if not used for the trip.

- a) A fundraising event will not be necessary to fund this trip.
- b) this event is not a mandatory attend event, any eligible varsity team member wanting to go but does not have the necessary funds will be able to attend. The costs for such player will be picked up by the Varsity Baseball Booster Club.
- c) No eligible student wishing to make the trip will be excluded for lack of funds.

## SMHS VARSITY BASEBALL SPRING BREAK TRAVEL ITENERARY

LOCATION: SARASOTA FLORIDA (Sarasota High School – host school)  
DATES: SATURDAY MARCH 24<sup>TH</sup> – FRIDAY MARCH 30

### SATURDAY MARCH 24

8:15 AM Depart LAX United Airlines FLT 1125 (1 stop Houston Tx.)  
(player's are responsible for getting their own rides to the airport)  
5:47PM arrive TPA (Tampa Fl.)  
6:30PM depart Tampa for Sarasota Fl.  
7:30 PM arrival Sand Castle Beach Resort Lido Key for check in.

### SUNDAY MARCH 25

FREE DAY FOR PLAYERS (no games schedule)

REMAINDER OF ITENERARY SUBJECT TO GAME TIMES AND LOCATION.  
Itinerary will update daily

### FRIDAY MARCH 30

8:00AM Depart for TPA Airport  
9:00 AM ARRIVE TPA  
12:00 PM Depart TPA United Airlines FLT 1797 (1 stop Houston TX)  
  
6:15 PM Arrive LAX  
(player's responsible for transportation from airport to home)