**EL DORADO UNION HIGH SCHOOL DISTRICT**

**Instructional Trip Request**

1. In accordance with BP/AR 6153, was a conference held with the Principal/Designee to discuss the feasibility of the trip **BEFORE** any arrangements were made? [ ]  Yes [ ]  No

2. This request must be submitted to the appropriate school administrator at least **21 CALENDAR DAYS** prior to activity.

3. No student in a class or group may be excluded because of lack of funds *(EC 35330)*. No group may go on an outing if any member is excluded because of lack of funds.

4. Trips more than 300 miles, overnight, or out of state or country require **2 MONTHS PRIOR NOTICE** and approval by the Board.

5. Upon approval, teacher must execute **Form 6153-7**, Parent/Guardian Instructional Trip Authorization.

**TRIP INFORMATION**

|  |  |  |
| --- | --- | --- |
| DATE SUBMITTED       | SCHOOL *(Check)* | [ ]  EDHS [ ]  IHS [ ]  ORHS [ ]  PHS [ ]  UMHS [ ]  VA |
| ACTIVITY       | ACTIVITY LOCATION      |
| SPONSORING TEACHER(s) / ORGANIZATION       | **DATES OF TRIP** | DATE | TIME | LOCATION |
| PICKUP |       |       |       |
| EST. TOTAL TRIP MILES [ ]  Within 300-mile radius of transportation [ ]  Out of State [ ]  Beyond 300-mile radius of transportation [ ]  Out of Country***Describe trip itinerary on reverse side.*** | RETURN |       |       |       |
| EST. TOTAL HOURS:      | NO. INSTRUCTIONAL DAYS/HOURS MISSED       |
| CERTIFICATED STAFF | OTHER SUPERVISING ADULTS | PHONE |
| Staff | Classes Covered by |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
| **TRANSPORTATION INFORMATION** |
| APPROX. NO. OF STUDENTS *(Provide final list of students to Attendance Office and Transportation no later than day before trip.)*       | NO. OF ADULTS SUPERVISING      |
| TRANSPORTATION REQUESTED *(Be specific, specify arrangements being made)*[ ]  District (*See AR 6153, '4.2.2 and 4.3*) [ ]  Commercial[ ]  Private (*See AR 6153, '4.7*) [ ]  Other:       | AR 3541.1 and AR 6153 state: *Transportation to and from all district-sponsored field trips within a radius of 300 miles of Placerville will be performed by district employees.* All other trips may be contracted out; however, **Transportation shall be contacted and given an opportunity to submit a quote on all trips.**  |
| (REQUIRED) **Transportation has been given an** **opportunity to submit a quote on this trip. *X*** |
|  *Director of Transportation’s Signature Date Estimate No.* |
| **TRIP COSTS (THIS SECTION MUST BE COMPLETED REGARDLESS OF FUNDING SOURCE.)** |
| Funding Sources [ ]  Fund-raising activities (*Describe on reverse side*) [ ]  Sponsored organization [ ]  Budget allocation [ ]  Other (*Briefly explain*):  |
|  | BUDGET CODE **OR** FUNDING SOURCE | VERIFIED BY |
| Transportation Cost | $       |       |  |
| Driver Time | $       |       |  |
| Lodging Cost | $       |       |  |
| Meal Cost | $       |       |  |
| Entry Fees / Registration | $       |       |  |
| Personal Costs Per Student: $       x # of students | $       |       |  |
| Substitute | $       |       |  |
| TOTAL  | $  | **TOTAL MUST BE CALCULATED BEFORE SUBMITTING FORM.** |  |

**INSTRUCTIONAL TRIP REQUEST** (continued)

|  |  |
| --- | --- |
| EDUCATIONAL OBJECTIVES OF THE TRIP:  |  |
|       |
| ITINERARY *(Include number and length of instructional activities, place(s) students will stay, number and grade levels of students participating, other pertinent information):* |
|       |
| FUND-RAISING: |  |
|       |
| OTHER SUPPORT *(Include plan (list below or attach) to support students unable to contribute all or part of the personal costs of the field trip)*: |
| No. Students      | Plan:       |

**ADMINISTRATION USE ONLY / APPROVALS**

**APPROVALS:**

|  |  |
| --- | --- |
| [ ]  Approved as submitted  | [ ]  Approved with the following condition(s):        |
| [ ]  Not Approved  |

 Department Chairperson\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Department\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Principal *(for trips within a 300-mile radius)*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TRACKING:**

|  |  |  |
| --- | --- | --- |
| DATE | ITEM | COMMENT |
|       | Transportation called | Contact:       [ ]  Hours Verified |
|       | Request for Transportation form submitted*(see Form 3541.1A or 3541.1B)* |       |
|       | Activity added to Master Contract |       |
|       | Sent to District Office for approval |       |
|       | Returned to teacher |       |
|       | Final list of students submitted to Attendance Office and Transportation |       |

     

Consult a map or on-line map service to determine a more accurate mileage.

NOTE: Even though trips to Nevada or to the southern portion of Oregon are within 300 miles, they are still out-of-state trips and require Board approval.