

FIELD TRIP REQUEST FORM

☐ Day Trip, school day☐ Overnight Trip _____ Nights☐ Day Trip, non-school day☒ Out-of-State Trip ☒ NightsDate(s) of Trip April 3 - 18 2020 Alternate(s) _____Destination TAHITI, French Polynesia

If overnight or out-of-state: Intermediate destinations, departure, and arrival times:

SFO - Papeete, Tahiti, 11:20 PM on French Bee, on 4/3/2020; 4:40 AM (arrival)
Papeete - SFO, 7:00 AM on French Bee on 4/18/2020; 6:05 PM (arrival)Date of Request 9/24/2019 # days prior to trip 188Sponsoring Group Global Studies School DRAKENumber of Students Participating 21 (possibly 22) Number of Chaperones 3Purpose of Trip French Linguistic & Cultural Immersion Exchange

Attach documentation for scheduled events, programs

Swimming included ☒ Yes ☐ No If yes, complete #(2) 6153Estimated Cost of Trip \$47,376.00 Cost per Student \$2,256School M/E ☐ Student Body ☐ Athletics ☐ Organization Budget☐ Fund-raising ☒ Student/Parent Contribution ☐ Other _____

CHECK WITH BUDGET SECRETARY FOR FINANCIAL REQUIREMENTS & DEADLINES

Mode of Transportation: ☐ Contract Bus ☐ Employee Car ☐ Volunteer Car☐ Student driven car ☐ Other: plane

Automotive transportation required completed Driver Certification Form #(1) 3541.1 and insurance declarations

Insurance Coverage Needed: (See 5142 - Insurance)

☐ Day Trip: Student insurance for students not covered by their own or parent's insurance, insurance available through the District☒ Overnight or Out-of-State Trip: Extended Short-Term Group Coverage, available through the DistrictStaff Member in Charge (print name) T. ROSENTHAL-COX

I have read and will abide by Board policies and regulations pertaining to field trips.

(cf. 6153 - District-Sponsored Trips)

(cf. 5142 - Transportation for School-Related Trips)

(cf. 3541.1 - Insurance)

Staff Member Signature T. ROSENTHAL-COXPrincipal's Signature [Signature] Date 10/1/17

TAMALPAIS UNION HIGH SCHOOL DISTRICT

Larkspur, California

FIELD TRIP REQUEST FORM
SWIMMING SUPPLEMENT

Type of Facility

- ☐ TUHSD Pool
- ☐ Other school district pool
- ☐ Commercial or public swimming facility

Phone _____

- ☐ A private pool is being used; certificate of liability insurance for not less than \$1,000,000 has been obtained.

☐ Name of owner: _____☐ Location of pool: _____☐ Phone: _____

- ☒ Parents notified and signed permission given.
- ☒ Swimming ability of staff and students determined.
- ☒ Lifeguard will be available.
- ☒ Written instructions on supervision/safety distributed to staff and chaperones.
- ☒ Provision made for students with varying swimming abilities.
- ☒ Provision made for floatation devices as appropriate.
- ☒ A one-on-one system for monitoring will be implemented.
- ☒ The principal and teacher initiating swim activities has, or will have, visited the site and assessed risks prior to trip.
- ☒ Written emergency procedures are in place.
- ☒ A ratio of not less than one chaperone for each 10 students will be maintained.

Staff member in charge: Tahia Rosenthal-CoxPrincipal, signature [Signature] Date 10/1/19

TAMALPAIS UNION HIGH SCHOOL DISTRICT
Larkspur, CA