

FIELD TRIP REQUEST FORM

- ☐ Day Trip, school day ☐ Overnight Trip, ___ Nights
☐ Day Trip, nonschool day ☒ Out-of-State Trip, 11 Nights

scanned

Date(s) of Trip: 3/28-4/8-2020 Alternate(s): X

Destination: LONDON GLOBAL STUDIES, LONDON, UK.

If overnight or out-of-state: Intermediate destinations, departure, and arrival times:
SFO to Heathrow, Trip begins & ends @ airport.
JESMOND HOTEL, BLOOMSBURY. 3pm depart. 6pm return.

Date of Request: 10-14-19 # days prior to trip: ___

Sponsoring Group: GLOBAL STUDIES/CTE School: TAM HIGH SCHOOL

Number of Students Participating: 27 Number of Chaperones 5

Purpose of Trip: Theatre immersion, plays, workshops, tours,
museums, galleries, London Creative Culture.

Attach documentation for scheduled events, programs

Swimming included: Yes ___ No X If yes, complete E(2) 6153

Estimated cost of trip: \$91,800.⁰⁰ Cost per student: \$3400.⁰⁰

Charged to: ___ School M/E ___ Student Body ___ Athletics ___ Organization budget
X Fund-Raising X Student/Parent Contribution ___ Other

CHECK WITH BUDGET SECRETARY FOR FINANCIAL REQUIREMENTS & DEADLINES.

Mode of Transportation: ___ Contract bus ___ Employee car ___ Volunteer car
 ___ Student driven car X Other: Flight + Virgin Atlantic

Automobile transportation requires completed Driver Certification Form E(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

X Overnight or Out-of-State Trip: Extended Short-Term Group Coverage, available through the
 District

Staff Member in Charge, Print Name: Ben Cleveland

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)

Signature [Signature]

Principal's Signature [Signature] Date 10/17/19

TAMALPAIS UNION HIGH SCHOOL DISTRICT

Larkspur, California