



SACRAMENTO CITY UNIFIED SCHOOL DISTRICT BOARD OF EDUCATION

Agenda Item# 13.1j

Meeting Date: January 18, 2024

Subject: Approve CK McClatchy School Debate
Tournament in Las Vegas, NV from February 2-5, 2024

- Information Item Only
- Approval on Consent Agenda
- Conference (for discussion only)
- Conference/First Reading (Action Anticipated: _____)
- Conference/Action
- Action
- Public Hearing

Division: Deputy Superintendent

Recommendation: Approve MC McClatchy High School Debate
Tournament in Las Vegas, NV from February 2-5, 2024

Background/Rationale: On February 2, 10 students, the debate coach, and three chaperones will travel by commercial airline to Las Vegas for 3 nights to participate at The University of Nevada Las Vegas Debate Tournament.

Financial Considerations: There is no cost to the district. Expenses will be paid by the Sacramento Urban Debate League.

LCAP Goal(s): College preparedness, increasing communication and critical thinking skills.

Documents Attached:

1. Out-of-state field trip documents

Estimated Time of Presentation: N/A

Submitted by: Mary Hardin Young, Interim Deputy Superintendent

Jerad Hyden Instructional Assistant Superintendent

Approved by: Lisa Allen, Interim Superintendent

TRAVEL REQUEST FORM (ACC-F014)

Sacramento City Unified School District

Request to Attend: Conference/Workshop
 Business Meeting

Purpose for Attending:
 Professional Development
 Continued Education Credits Earned

Instructions: This form must be completed and received in Accounts Payable at least 30 days prior to the proposed trip- 60 days if out-of-state.

School/Department: CK McClatchy

Date: 11/30/23

Date(s) of Event: February 2-5, 2024

Location: University of Nevada Las Vegas

Event Title (attach brochure): Golden Desert Debate tournament

Purpose: For students to participate in debate tournament. It gives students an opportunity to build their public speaking skills and network with other student groups.

How does this travel align with the District's strategic plan? It prepares students for college and career readiness.

How will this activity/event be used and shared? Students participating will share their experience with other students in the group.

Name of Attendee(s) (attach sheet for additional attendees)	Position	Substitute No. (Y/N)	No. of Days Required	Budget Code (for substitute)
		No		
		No		
		No		
		No		
		No		
		No		
		No		
		No		

If a Title is needed, send a copy of this form to Personnel Box 770

Additional Attendees Attached

Approvals:

[Signature]
 Principal/Department Head Signature & Print Name

12/11/23
 Date

[Signature]
 Cabinet Level or Designee Signature

12/15/23
 Date

[Signature]
 Chief Business Officer Signature

12/19/23
 Date

[Signature]
 Superintendent or Designee Signature

12/19/23
 Date

District cost for all attendees (estimate)

Registration Fee: 0

Meals included? Breakfast Lunch Dinner

Lodging: _____

Transportation: _____

Meals: _____

Other: _____

TOTAL: 0

Category: General Fund/Unrestricted Budget: _____

If any meals are included in the cost of registration, how many of each: Breakfast _____ Lunch _____ Dinner _____

Prepayment Requested: All checks will be sent to the school/department unless prior arrangements have been made (with AP) to pick up check

Requestion #	Dollar Amount
Registration Fee	_____
Hotel	_____
Airfare ****	_____
Car Rental ****	_____

If airfare or car rental is requested, send a copy of this form to Purchasing, Box 830
 Rev. F 3-22-11 ACC-F014

Sacramento City Unified School District
FIELD TRIP REQUEST FORM
 (USE A SEPARATE FORM FOR EACH TRIP)

Parent Permission Form is required for each student. See below reference distribution section for details concerning each type of trip.

School Name CK McClatchy Date 12 / 01 / 23

Teacher's Name Stephen Goldberg Room # NA Telephone # 916-712-0782 Fax # _____

Field Trip Destination University of Las Vegas

- Walking
 Local-50 mile radius
 Out-of-Town (Beyond 50 mile radius)
 Overnight
 Out-of-State/Country
 Involving Swimming or Wading
 Unusual Activities

Route (must provide written directions our map) NA

Educational nature of field trip/excursion Debate

Depart Date 02 / 02 / 24 Time 6:30 PM am/pm Return Date 02 / 05 / 24 Time 9:00 PM am/pm

- TRANSPORTATION will be provided by: Walking School Bus - contact Transportation Field Trip Office Train
 Charter Bus Company (District Approved): Yes No (Check with Field Trip Office) Public Transportation
 Private Vehicle/Parent Driver/Faculty Driver - Complete Volunteer Personal Automobile Use Form for each vehicle and driver.
 Commercial Airline Other: _____

Number of students participating: 10 Funding Source SUDL Financial Assistance Available? Yes No

Adult Chaperones:

(All clearances must be met prior to Field Trip Approval)

(Use a separate sheet if necessary)

	DRIVER						
1) <u>Stephen Goldberg</u>	<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no	<input checked="" type="checkbox"/> Driver	<input checked="" type="checkbox"/> Fingerprint	<input checked="" type="checkbox"/> Mandated Reporter Training	<input checked="" type="checkbox"/> TB	
2) <u>Serena Jones</u>	<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no	<input checked="" type="checkbox"/> Driver	<input checked="" type="checkbox"/> Fingerprint	<input checked="" type="checkbox"/> Mandated Reporter Training	<input checked="" type="checkbox"/> TB	
3) <u>Jack Walsh</u>	<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no	<input type="checkbox"/> Driver	<input checked="" type="checkbox"/> Fingerprint	<input checked="" type="checkbox"/> Mandated Reporter Training	<input checked="" type="checkbox"/> TB	
4) <u>Paul Hemesath</u>	<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no	<input checked="" type="checkbox"/> Driver	<input checked="" type="checkbox"/> Fingerprint	<input checked="" type="checkbox"/> Mandated Reporter Training	<input checked="" type="checkbox"/> TB	
5) _____	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> Driver	<input type="checkbox"/> Fingerprint	<input type="checkbox"/> Mandated Reporter Training	<input type="checkbox"/> TB	
6) _____	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> Driver	<input type="checkbox"/> Fingerprint	<input type="checkbox"/> Mandated Reporter Training	<input type="checkbox"/> TB	
7) _____	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> Driver	<input type="checkbox"/> Fingerprint	<input type="checkbox"/> Mandated Reporter Training	<input type="checkbox"/> TB	
8) _____	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> Driver	<input type="checkbox"/> Fingerprint	<input type="checkbox"/> Mandated Reporter Training	<input type="checkbox"/> TB	

Teachers and Staff Attending (Use a separate sheet if necessary)

DRIVER		DRIVER	
1) _____	<input type="checkbox"/> yes <input type="checkbox"/> no	2) _____	<input type="checkbox"/> yes <input type="checkbox"/> no
3) _____	<input type="checkbox"/> yes <input type="checkbox"/> no	4) _____	<input type="checkbox"/> yes <input type="checkbox"/> no
5) _____	<input type="checkbox"/> yes <input type="checkbox"/> no	6) _____	<input type="checkbox"/> yes <input type="checkbox"/> no

Principal Approval [Signature] Date 12/11/23

Segment IAS/Department Head Approval [Signature] Date 12/15/23

Risk Management Approval (if applicable) [Signature] Date 12/18/23

Distribution: Refer to the Field Trip Information Form RSK 104F for the forms and distribution required for each trip. All field trips require a completed packet. Maintain all documents at site:

- Local Trip: (walking): Submit walking trips to Principal for approval two weeks prior to trip.
- Local Trip: (school bus/charter bus/RT/Amtrak): (50-mile radius) - Submit to Principal for approval two weeks prior to trip.
- Local Trip: (50-mile radius; driver) - Submit driver led trips to Principal for approval 6 weeks prior to trip.
- Out-of-Town: (beyond 50-mile radius) - Submit to Principal for approval then forward to Segment IAS/Department Head for approval 6 weeks prior to trip.
- Overnight Trip: Submit to Principal for approval then forward to Segment IAS/Department Head for approval 6 weeks prior to trip.
- Trip Involving Swimming or Wading: Submit to Principal for approval then forward to Segment IAS/Department Head for approval 6 weeks prior to trip.
- Trip Involving Unusual Activities (Water sports or high-risk activities such as rafting, snorkeling, rock climbing, skiing, etc.) - Submit to Principal for approval then forward to Segment IAS/Department Head/Risk Management for approval 6 weeks prior to trip. This may require Special Event Liability Insurance.
- Out-of-State/Country: Submit to Principal for approval then forward to Segment IAS/Department Head for approval 6 weeks prior to trip. Must have Superintendent, Board of Education and Risk Management approval prior to trip. Segment IAS office will place field trip item on Board Agenda for final approval.
- Approved forms will be returned by Segment IAS/Department Head's Office. Maintain a copy of all forms at site for 2 years.
- Venue/Destination: Must comply with SCUSD COVID19 mitigation guidelines for all trips outside of district facilities.

Reviewed by Site Office Manager: _____
 (Initials)

Sacramento City Unified School District
**OUT-OF-STATE OR OUT-OF-COUNTRY
 TRAVEL REQUEST**

School Name CK McClatchy Date 12 / 06 / 24

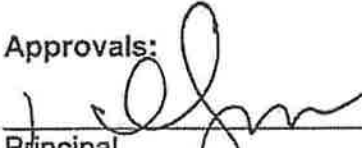
Teacher's Name Stephen Goldberg Room # NA Telephone # 916-712-0782


Field Trip Destination University of Las Vegas

Reason for travel UNLV is putting on a national circuit debate tournament that both CKM's Public Form JV and Varsity and the Policy Debate JV and varsity team can attend.

List unusual activities, water activities or high risk activities (examples: rafting, snorkeling, rock climbing, skiing, etc.) as a special parent waiver may be required. Submit copy of contract or waiver to Risk Management for review before signing. Attach a detailed itinerary for each day

Signed 
 Teacher

Approvals:
 12/11/23
 Principal Date

 12/18/23
 Risk Management Dept. Date

 12/15/23
 Segment Administrator Date

 12/19/23
 Superintendent Date

 / /
 Board Approval Date

Sacramento City Unified School District
**OVERNIGHT TRIPS
ACCOMMODATION INFORMATION**

NO PRIVATE HOMES, AIR BNB, HOSTELS

Facility Name Stephen Goldberg Date Reserved 12 / 06 / 23

Address 3275 Paradise Rd City Las Vegas NV zip 89109

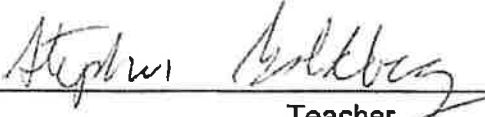
Reservations Contact Person: Stephen Goldberg

Telephone # (855)816-6193 Fax # _____

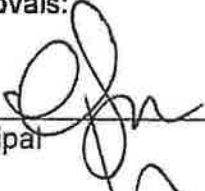


Total Rooms Reserved: 6

Room #: TBA

Reservation Dates: 02 / 02 / 24 - 02 / 05 / 24

Signed 
Teacher

Approvals:

<u></u>	<u>12 11 23</u>
Principal	Date
<u></u>	<u>12 15 23</u>
Segment Administrator	Date
<u></u>	<u>12 18 23</u>
Risk Management Approval	Date