

Letter to the Board of Education Re: Out-of-State/Out-of-Country Field Trip Request

June 12, 2023

To AUSD Board of Education Members:

On October 17 – October 22, 2023, Encinal Jr. Sr. High School is requesting permission to arrange a field trip to Orlando, Florida, for Radio Broadcasting students and their teacher to attend the 2023 National Student Electronic Media Convention hosted by College Broadcasters, Inc. Approximately 10 students and two chaperones will be accompanying the students on this trip.

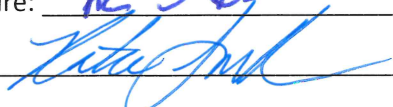
Kevin Gorham, the Radio Broadcast Journalism teacher at Encinal, will lead this field trip for students to expose them to radio broadcasting programs offered at the post-secondary level. Students will participate in workshops and seminars to learn from veteran broadcasters.

The group will travel by plane from San Francisco to Orlando. They will stay at the Rosen Plaza Hotel where the conference will be held. The program cost for each student, including instruction, transportation, lodging, meals, and expenses is \$1500. The Radio class will hold a series of fundraisers to cover the cost of individual students who cannot afford the trip. No student will be prevented from going due to lack of funds. The CTE grants will cover the cost of a substitute who will be needed to cover the Radio classes for four school days that Mr. Gorham will be on the field trip.

The instructional purpose of this field trip is to expose advanced broadcasting students to potential careers and post-secondary programs. The CTE standards that will be addressed include providing students with hands-on training and exposure. Mr. Gorham attended a CBI conference several years ago and found it to be extremely valuable as an instructor and for his students. It is an opportunity for students to network and to learn about the high-quality broadcasting programs at the secondary level.

IMPORTANT NOTE: The Final Itinerary and Daily Schedule will be finalized during the summer. However, we are seeking approval from the Board of Education so we can proceed with fund raising and flight reservations. Our plan is to update our field trip paperwork and resubmit it for BOE final approval at the August BOE meeting.

Lead teacher's signature:  Date: 6/8/23

Principal's signature:  Date: 6/8/23

School: ENCINAL Jr. Sr. High School



Out-of-State/Out-of-Country Field Trip Request

School: Encinal Jr. Sr. High School

Lead teacher (attending field trip): Kevin Gorham

Additional teacher(s) attending field trip: _____

Grade(s): 10 - 12

Number of students: _____

Number of chaperones*: 2

**There must be a minimum of 1 adult for every 15 students.*

Date(s) of field trip: 10/17/23 - 10/22/23 **Overnight trips must work with COVID team to develop a testing plan*

Time of departure (leaving from school): 5 AM

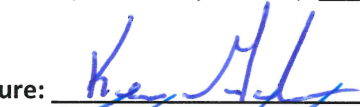
Time of arrival (returning to school): 6 PM

Destination/venue name: Rosen Plaza Hotel - Orlando, FLA

☐ Venue contract is attached. **Contract must be processed through Business Services*

Destination/venue phone number: 800-627-8258

Destination/venue address (include city & state): 9700 International Drive, Orlando FLA 32819

Lead teacher's signature: 

Date: 6/8/23

Principal's signature: 

Date: 6/8/23

☐ Pre-approval

☐ Denied Reason: _____

Curriculum & Instruction Office Use Only

Director of Elementary/Secondary's signature: _____ Date: _____

☐ Conditional Approval

☐ Denied Reason: _____

Required forms received for final approval:

☐ Out-of-State/Out-of-Country Field Trip Request

☐ Field Trip Chaperone List

☐ Roster of Field Trip Participants / class roster from Aeries **AND** all parent/guardian consent forms

Director of Elementary/Secondary's signature: _____ Date: _____

☐ Conditional Approval (pending Board of Education approval)

☐ Denied Reason: _____

Board Approved Date: _____



☐ Check this box if the field trip is NOT instructional. Review the examples below, and check the box that applies:

- | | |
|---|--|
| ☐ Aviation activities (i.e. aircraft or helicopter rides from school property)
☐ Hot air balloon rides
☐ Parasailing
☐ Sky-diving
☐ Any other aviation or aircraft related activity
☐ Excursions requiring the use of non-commercial aircraft (i.e. private planes)
☐ Automobile Activities (i.e. demolition derbies, auto races)
☐ Excursions to natural disaster areas (i.e. earthquakes, floods, hurricane, tornado zones)
☐ Excursions to war zones (imminent or existing)
☐ Excursions to regions with political or civil instability
☐ Dunk tanks
☐ Mechanical bulls
☐ Diving into or sliding on foam, mud, ice or snow
☐ Demolition of derelict vehicles, equipment or buildings
☐ Ice climbing / mountain climbing
☐ Use of fireworks or other pyrotechnic devices
☐ Use of air-filled "Fun Structures" (jump houses)
☐ Bungee jumping | ☐ Archery
☐ Cliff rappelling / rappelling towers
☐ Climbing walls
☐ Downhill skiing
☐ Firing ranges
☐ Gymnastics
☐ Ice skating
☐ Ice hockey
☐ In-line skating
☐ Mountain biking
☐ Paintball warfare games
☐ Scuba diving
☐ Skateboarding
☐ Snowboarding / snow blading
☐ Tobogganing
☐ Whitewater rafting / kayaking
☐ Winter camping |
|---|--|

Instructional Purpose*

****All staff must state the purpose of the field trip below.***

What is the purpose of this trip?

Provide exposure for advanced radio broadcasting students to high-quality media training

List activities:

Attend broadcasting workshops

Exposure to high-quality college broadcasting programs

Network with media professionals

List anticipated student outcome:

Gain understanding of high quality media programs

Learn about broadcasting trends

Gain exposure to podcasting



List state standards/content to be addressed:

1. CTE industry exposure
2. Learn all aspects of the broadcasting industry

Describe pre-activities:

Submit recordings for review by panelists

Research workshops/speakers

Prep for sessions

Describe post-activities:

Debrief with other radio classes

Share highlights with Encinal community

Reasons for excluding any student(s)*:

****All students must be allowed to participate regardless of ability to pay associated fees.***

NA

Provision made for student(s) not participating:

Students will attend scheduled classes



Mode of Transportation

- ☒ Airplane
☐ Chartered bus
☒ Commercial transport (city bus/BART/ferry/etc.) ****Increased chaperone requirements***
☐ District vehicle
☐ Private vehicle

Flight #1 Information (leaving from California)

Confirmation #: TBD
Airline: _____
Name of contact: _____
Airport (departure): _____
Airport (arrival): _____
Airline phone #: _____

Flight #2 Information (returning to California)

Confirmation #: TBD
Airline: _____
Name of contact: _____
Airport (departure): _____
Airport (arrival): _____
Airline phone #: _____

Chartered Bus Information

- ☐ Bus contract is attached. ****Bus contracts must be processed through Business Services.***

PO #: NA
Confirmation #: _____
Bus company: _____
Name of contact: _____
Company address (include city & state): _____
Company phone #: _____



Transportation costs will be paid for by:

****PTA/Music Boosters/etc. cannot directly pay for chartered buses. Buses must be paid for through a donation & PO.***

- ☐ School
☐ District
☒ Individual student
☐ Student body
☐ PTA
☒ Other CTE program will cover cost of sub for Mr. Gorham's classes

Lodging Information

Confirmation #: TBD

Hotel name: _____

Name of contact: _____

Hotel address (include city & state): _____

Hotel phone #: _____

Lodging costs will be paid for by:

- ☐ School
☐ District
☒ Individual student
☐ Student body
☐ PTA
☐ Other _____



<u>Itinerary and Daily Schedule</u> <u>(includes departure and arrival times from and to each location)</u>		
Date	Time	Activity/Event
10/17/23	5 AM	Students will meet at Encinal and take BART to SFO
	9:30 AM	Flight to Orlando ✕
	5 pm	Arrive in Orlando
	6 pm	Check into Rosen Plaza Hotel
	7 pm	Dinner
	9 pm	Adjourn for night
10/18/23	9am - 5 pm	Attend conference
10/19/23	9am- 5 pm	Attend conference
10/20/23	9am- 5 pm	Attend conference
10/21/23	9am - 5 pm	Attend conference
10/22/23	8 am	Depart for airport
	11 am (est)	Flight to San Francisco ✕
	4 pm (est)	Arrive in SFO
	6 pm	Return to Encinal by Bart

* Flights TBD



Parent/Guardian Informed Consent for Field Trip

School: Encinal Jr. Sr. High School

Teacher: Kevin Gorham

Room #: 6001

Date(s) of field trip: 10/17/23 - 10/22/23

Time of departure (leaving from school): 5 am (est)

Time of arrival (returning to school): 6 pm (est)

Destination/venue name: Orlando, FLA - Electronic Media Conference

Destination/venue phone #: 407-996-9700

Destination/venue address (include city & state): Rosen Plaza Hotel 9700 International Drive, Orlando FLA 32819

Student's last name: _____

Student's first name: _____

Student's cell phone #: _____

Student's home address (include city & state): _____

Transportation Mode

☐ Chartered bus

☒ ~~Commercial transport (city bus/BART/ferry/etc.)~~

☐ District vehicle

☐ Private vehicle

☒ AIRPLANE

Lodging Information

Hotel name: Rosen Plaza Hotel

Hotel address (include city & state): 9700 International Drive Orlando, FLA 32819

Hotel phone #: 407 996-9700

In the event of illness or injury, I hereby consent to whatever x-ray, examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care are considered necessary in the best judgment of the attending physician, surgeon, or dentist and performed by or under the supervision of a member of the medical staff of the hospital or facility furnishing medical or dental services as deemed necessary for the student's safety and welfare. It is understood that the resulting expenses will be the responsibility of the participant.

It is recommended that all students have medical or student accident insurance. If you do not have student accident insurance, it is available through SI. More information regarding this coverage is included in your parent handbook. You can enroll online at www.studentinsuranceusa.com.

(page 1 and page 2 must be completed prior to submitting this form)

**A special note to Parents/Guardians regarding prescription medication/drugs:**

1. All prescription medication/drugs must be registered on this form;
2. All prescription medication/drugs, except those which must be kept on the student's person for emergency use, must be kept and distributed by the staff;
3. ☐ _____ Check and initial here if there are health/medical concerns that the staff should be aware of, and if any prescription medication/drugs are required during the field trip*;
****If your student has a health/medical concern, kindly attach a description of that concern to this form.***
4. If prescription medication/drugs are to be taken by the student, list them here:

_____	_____
_____	_____

As stated in California Education Code Section 35330, I understand that I waive all claims against the District, its officers, agents, volunteers, and employees for any injury, accident, illness, or death occurring during or by reason of this field trip or excursion, including acts of negligence by the District, its officers, agents, volunteers, or employees.

I understand that COVID-19 is a highly contagious virus. I understand that my student must adhere to the protocols of Alameda Unified as well as County, State and Federal COVID-19 guidelines when participating in a District event. I further understand that as a parent/guardian, I fully assume all risks related in any way to COVID-19 for my students attendance or participation in District events, and hereby agrees to indemnify, defend, and hold harmless the district, its officers, employees, and agents (collectively "AUSD") from and against any and all injuries, losses or damages, costs, expenses, claims, lawsuits, judgments, and/or liabilities (including attorney fees) arising directly or indirectly from, or related in any way to, any claims made by or on behalf of any individual(s) for bodily injury, death, loss of use, monetary loss, or any other injury from or related to COVID-19. Users themselves also hereby release, waive and discharge any claims, demands, damages, expenses, losses or liabilities (including attorney fees) against AUSD for any injury, illness, death or monetary loss relating in any way to COVID-19 in connection with participation in this event.

I fully understand and agree that failure of the student to follow field trip rules or safety requirements may result in the student being sent home, at my expense, and that the student may be barred as a result from future field trips.

Parent's/guardian's name (please print first name and last name): _____

Parent's/guardian's cell phone #: _____

Parent's/guardian's work phone #: _____

Parent's guardian's home phone #: _____

Parent's guardian's email address: _____

Medical Insurance Carrier: _____

Medical Policy #: _____

Emergency contact's name (please print first name and last name): _____

Emergency contact's cell phone #: _____

Parent's/guardian's name (please print first name and last name): _____

Parent's/guardian's signature: _____ **Date:** _____

Parent's/guardian's signature reflects their knowledge and approval of the field trip described above. This form must be returned to the school before the student can participate in the activity.



Roster of Field Trip Participants

(form is not required if substituted with class roster from Aeries)

School: _____

Teacher: _____ Room #: _____

Grade(s): _____

Date(s) of field trip: _____

Destination/venue name: _____

	Student Name (please print first name and last name)	Student ID #	Student Age	C&I Office Use Only: Consent forms ✓
1.	TBD			
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				



	Student Name	Student ID #	Student Age	C&I Office Use Only: Consent forms ✓
16.				
17.				
18.				
19.				
20.				
21.				
22.				
23.				
24.				
25.				



Student Voluntary Waiver, Release, and Indemnity Agreement
(form is required to completed for Out of State/Out of Country Field Trips)

(read carefully before signing)

I, _____, hereby affirm that I have voluntarily enrolled "the student,"
(parent's/guardian's first name and last name)

_____, in **Electronic Media Conference** _____:
(student's first name and last name) (description of field trip)

conducted from 10/17/2023 through 10/22/2023 by College Broadcasters, Inc _____: in
Orlando, FLA _____
(location) (name of company conducting trip)

Mode of Transportation (District Approved)

☐ The student will use the District approved transportation by airplane, chartered bus, commercial transport (city bus/BART/ferry/etc.), district vehicle and/or private vehicle.

Mode of Transportation (Privately Arranged by Parent/Guardian)

☐ The student will not use the District approved transportation. The student's parent/guardian will be providing the student's transportation.

(Transportation to/from this event is on your own. The District shall NOT be responsible for and shall NOT assume liability for any injury or loss which may result from such non-District provided transportation.)

I certify that I am cognizant of all the inherent dangers associated with the student's participation in this program including but not limited to accidents, illness, civil and/or international strife, terrorism, breaches of airport and/or airline security, and any other harm, injury, illness or damage which may befall the student. I also understand that neither the Alameda Unified School District ("the District"), the members of its Board of Education, its officers, employees, instructors nor any of its agents serve as guardians or insurers of the student's safety. In the event of illness or injury, I hereby consent to whatever x-ray, examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care are considered necessary in the best judgment of the attending physician, surgeon, or dentist and performed by or under the supervision of a member of the medical staff of the hospital or facility furnishing medical or dental services as deemed necessary for the student's safety and welfare. It is understood that the resulting expenses will be the responsibility of the participant.

I further acknowledge and understand that participation in the trip by the student is not an educational requirement for any course of study which the student is presently pursuing or may pursue in the future.

As stated in California Education Code Section 35330, I understand that I waive all claims against the District, its officers, agents, volunteers, and employees for any injury, accident, illness, or death occurring during or by reason of this field trip or excursion, including acts of negligence by the District, its officers, agents, volunteers, or employees.

The supervising teacher or sponsor will discuss field trip rules and safety requirements with students and adult chaperones prior to the field trip, which may include dangerous or hazardous conditions or circumstances exposing the

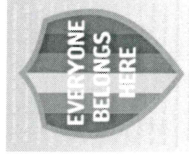


students and adults to potential harm or injury, potentially including death. Students and adults are required to obey all rules and safety requirements of the field trip, as well as Codes of Conduct and general standards for respect of persons and property and good behavior.

I fully understand and agree that failure of the student to follow field trip rules or safety requirements may result in the student being sent home, at my expense, and that the student may be barred as a result from future field trips.

Parent's/Guardian's signature: _____

Date: _____



Field Trip Chaperone List

(form must include all parents/guardians/staff chaperones)

School: Encinal Jr. Sr. High School Teacher: Kevin Gorham Room #: 6001
Grade(s): 10 - 12 Date(s) of field trip: 10/17/23 - 10/22/23 Destination/venue name: Orlando FLA - Rosen Plaza Hotel

Last Name	Gorham	Nguyen		
First Name	Kevin	Franklin		
Cell Phone #	510-387-5406	510-463-7609		
Field Trip Chaperone Agreement ✓				
Adult Voluntary Waiver, Release, and Indemnity Agreement (Out of State/Out of Country Trips Only) ✓				
Will chaperone be driving students in a private vehicle?				
If Chaperone will be driving students in a private vehicle...				
Annual Transportation of Students in Privately Owned Vehicles				
Certificate and Authorization ✓				
Copy of Driver's License ✓				
Insurance is in Driver's Name ✓				
Driver Has Met Minimum Insurance Requirements ✓				
HR Required Forms				
Volunteer Information/Agreement ✓				
Copy of TB Results (not required for 1-time occurrence) ✓				
Live Scan Clearance via HR ✓				

I have verified that all chaperones listed above have been approved as district chaperones for this field trip.

Principal's signature: [Signature] Date: 6/8/23



Adult Voluntary Waiver, Release, and Indemnity Agreement

(form is required to be completed for Out of State/Out of Country Field Trips)

(read carefully before signing)

I, Kevin Gorham, hereby affirm that I have voluntarily enrolled in
(adult's first name and last name)

2023 Electronic Media Conference: conducted from 10/17/2023 through 10/22/2023
(description of field trip)

by College Broadcasters, Inc: in Orlando, FLA
(name of company conducting trip) *(location)*

Mode of Transportation (District Approved)

☐ I will use the District approved transportation by airplane, chartered bus, commercial transport (city bus/BART/ferry/etc.), district vehicle and/or private vehicle.

Mode of Transportation (Privately Arranged by Adult)

☐ I will not use the District approved transportation. I will be providing my own transportation.
(Transportation to/from this event is on your own. The District shall NOT be responsible for and shall NOT assume liability for any injury or loss which may result from such non-District provided transportation.)

I certify that I am cognizant of all the inherent dangers associated with my voluntary participation in this program including but not limited to accidents, illness, civil and/or international strife, terrorism, breaches of airport and/or airline security, and any other harm, injury, illness or damage which may befall me. I also understand that neither the Alameda Unified School District ("the District"), the members of its Board of Education, its officers, employees, instructors nor any of its agents serve as guardians or insurers of my safety. In the event of illness or injury, I hereby consent to whatever x-ray, examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care are considered necessary in the best judgment of the attending physician, surgeon, or dentist and performed by or under the supervision of a member of the medical staff of the hospital or facility furnishing medical or dental services as deemed necessary for my safety and welfare. It is understood that the resulting expenses will be the responsibility of the participant.

I further acknowledge and understand that my participation in the trip is not an educational requirement for any course of study which I or the student is presently pursuing or may pursue in the future.

As stated in California Education Code Section 35330, I understand that I waive all claims against the District, its officers, agents, volunteers, and employees for any injury, accident, illness, or death occurring during or by reason of this field trip or excursion, including acts of negligence by the District, its officers, agents, volunteers, or employees.

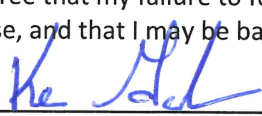
The supervising teacher or sponsor will discuss field trip rules and safety requirements with students and adult chaperones prior to the field trip, which may include dangerous or hazardous conditions or circumstances exposing the students and adults to potential harm or injury, potentially including death. Students and adults are required to obey all rules and safety requirements of the field trip, as well as Codes of Conduct and general standards for respect of persons and property and good behavior.

ALAMEDA UNIFIED SCHOOL DISTRICT
Excellence & Equity For All Students



Educational Services
2060 Challenger Drive
Alameda, CA 94501

I fully understand and agree that my failure to follow field trip rules or safety requirements may result in myself being sent home, at my expense, and that I may be barred as a result from future field trips.

Adult's signature: 

Date: 6/8/23



Adult Voluntary Waiver, Release, and Indemnity Agreement

(form is required to be completed for Out of State/Out of Country Field Trips)

(read carefully before signing)

I, Franklin Nguyen, hereby affirm that I have voluntarily enrolled in
(adult's first name and last name)

2023 Electronic Media Conference: conducted from 10/17/2023 through 10/22/2023
(description of field trip)

by College Broadcasters, Inc: in Orlando, FLA
(name of company conducting trip) (location)

Mode of Transportation (District Approved)

☐ I will use the District approved transportation by airplane, chartered bus, commercial transport (city bus/BART/ferry/etc.), district vehicle and/or private vehicle.

Mode of Transportation (Privately Arranged by Adult)

☐ I will not use the District approved transportation. I will be providing my own transportation.
(Transportation to/from this event is on your own. The District shall NOT be responsible for and shall NOT assume liability for any injury or loss which may result from such non-District provided transportation.)

I certify that I am cognizant of all the inherent dangers associated with my voluntary participation in this program including but not limited to accidents, illness, civil and/or international strife, terrorism, breaches of airport and/or airline security, and any other harm, injury, illness or damage which may befall me. I also understand that neither the Alameda Unified School District ("the District"), the members of its Board of Education, its officers, employees, instructors nor any of its agents serve as guardians or insurers of my safety. In the event of illness or injury, I hereby consent to whatever x-ray, examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care are considered necessary in the best judgment of the attending physician, surgeon, or dentist and performed by or under the supervision of a member of the medical staff of the hospital or facility furnishing medical or dental services as deemed necessary for my safety and welfare. It is understood that the resulting expenses will be the responsibility of the participant.

I further acknowledge and understand that my participation in the trip is not an educational requirement for any course of study which I or the student is presently pursuing or may pursue in the future.

As stated in California Education Code Section 35330, I understand that I waive all claims against the District, its officers, agents, volunteers, and employees for any injury, accident, illness, or death occurring during or by reason of this field trip or excursion, including acts of negligence by the District, its officers, agents, volunteers, or employees.

The supervising teacher or sponsor will discuss field trip rules and safety requirements with students and adult chaperones prior to the field trip, which may include dangerous or hazardous conditions or circumstances exposing the students and adults to potential harm or injury, potentially including death. Students and adults are required to obey all rules and safety requirements of the field trip, as well as Codes of Conduct and general standards for respect of persons and property and good behavior.



I fully understand and agree that my failure to follow field trip rules or safety requirements may result in myself being sent home, at my expense, and that I may be barred as a result from future field trips.

Adult's signature: _____

Date: _____



Field Trip Chaperone Agreement

(form is required to be completed by parents/guardians)

School: Encinal Jr. Sr. High School
Teacher: Kevin Gorham Room #: 6001
Grade(s): 10 - 12
Date(s) of field trip: 10/17/23 - 10/22/23
Destination/venue name: Rosen Hotel - Orlando FLA

Chaperone's last name: Gorham
Chaperone's first name: Kevin
Chaperone's cell phone #: 510-387-5406
Chaperone's work phone #: _____
Chaperone's home phone #: _____
Chaperone's email address: Kgorham@alamedaunified.org

IF Parent/Guardian Chaperone:

Student Name (please print first and last name): _____

Relationship to student: _____

- ☐ I will be a driver during this field trip. I will be transporting my student in addition to other students.
☐ I will not be a driver during this field trip. I will not be transporting any students.
☐ I will be a driver during this field trip. I will only be transporting my student.

All chaperones are required to do the following:

- Supervise all students assigned to them at all times for the entire duration of the activity.
- Follow and enforce all school rules and AUSD policies and immediately report any violation of school rules/policies to the supervising teacher.
- Immediately report any unsafe incident or situation to the supervising teacher.
- Immediately report any disciplinary incident to the supervising teacher.

Chaperones are not permitted to consume alcohol or be under the influence of any controlled substance while participating in a school function.

I certify that I am cognizant of all the inherent dangers associated with my voluntary participation in this program including but not limited to accidents, illness, civil and/or international strife, terrorism, breaches of airport and/or airline security, and any other harm, injury, illness or damage which may befall me. I also understand that neither the Alameda Unified School District ("the District"), the members of its Board of Education, its officers, employees, instructors nor any of its agents serve as guardians or insurers of my safety. In the event of illness or injury, I hereby



consent to whatever x-ray, examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care are considered necessary in the best judgment of the attending physician, surgeon, or dentist and performed by or

under the supervision of a member of the medical staff of the hospital or facility furnishing medical or dental services as deemed necessary for my safety and welfare. It is understood that the resulting expenses will be the responsibility of the participant.

I further acknowledge and understand that my participation in the trip is not an educational requirement for any course of study which I or the student is presently pursuing or may pursue in the future.

As stated in California Education Code Section 35330, I understand that I waive all claims against the District, its officers, agents, volunteers, and employees for any injury, accident, illness, or death occurring during or by reason of this field trip or excursion, including acts of negligence by the District, its officers, agents, volunteers, or employees.

The supervising teacher or sponsor will discuss field trip rules and safety requirements with students and adult chaperones prior to the field trip, which may include dangerous or hazardous conditions or circumstances exposing the students and adults to potential harm or injury, potentially including death. Students and adults are required to obey all rules and safety requirements of the field trip, as well as Codes of Conduct and general standards for respect of persons and property and good behavior.

I fully understand and agree that my failure to follow field trip rules or safety requirements may result in myself being sent home, at my expense, and that I may be barred as a result from future field trips.

I have read the chaperone agreement and will adhere to the above expectations while chaperoning students on a school trip.

Parent's/guardian's name (please print first name and last name): Kevin Gorham

Parent's/guardian's signature: [Signature] Date: 6/8/23

School Office Use Only

School office manager has:

- ☐ received Annual Transportation of Students in Privately Owned Vehicles Certificate and Authorization for drivers who are transporting their students in addition to other students
- ☐ received a copy of driver's license
Driver's license expiration date: _____
- ☐ verified that the insurance is in the driver's name
- ☐ verified that the driver has met the minimum insurance requirements as listed above
Insurance expiration date: _____
- ☐ received Field Trip Chaperone Agreement
- ☐ received Volunteer Information/Agreement
- ☐ received a copy of TB Results
- ☐ confirmed Live Scan clearance via Human Resources

I have confirmed that the above individual has been approved as a district chaperone for this field trip.

Principal's signature: [Signature] Date: 6/8/23



Field Trip Chaperone Agreement

(form is required to be completed by parents/guardians)

School: Encinal Jr. Sr. High School

Teacher: Franklin Nguyen

Room #: 6001

Grade(s): 10 - 12

Date(s) of field trip: 10/17/23 - 10/22/23

Destination/venue name: Rosen Hotel - Orlando FLA

Chaperone's last name: Nguyen

Chaperone's first name: Franklin

Chaperone's cell phone #: 510-463-7609

Chaperone's work phone #: _____

Chaperone's home phone #: _____

Chaperone's email address: FNGUYEN@alamedaunified.org

IF Parent/Guardian Chaperone:

Student Name (please print first and last name): _____

Relationship to student: _____

- ☐ I will be a driver during this field trip. I will be transporting my student in addition to other students.
☐ I will not be a driver during this field trip. I will not be transporting any students.
☐ I will be a driver during this field trip. I will only be transporting my student.

All chaperones are required to do the following:

- Supervise all students assigned to them at all times for the entire duration of the activity.
- Follow and enforce all school rules and AUSD policies and immediately report any violation of school rules/policies to the supervising teacher.
- Immediately report any unsafe incident or situation to the supervising teacher.
- Immediately report any disciplinary incident to the supervising teacher.

Chaperones are not permitted to consume alcohol or be under the influence of any controlled substance while participating in a school function.

I certify that I am cognizant of all the inherent dangers associated with my voluntary participation in this program including but not limited to accidents, illness, civil and/or international strife, terrorism, breaches of airport and/or airline security, and any other harm, injury, illness or damage which may befall me. I also understand that neither the Alameda Unified School District ("the District"), the members of its Board of Education, its officers, employees, instructors nor any of its agents serve as guardians or insurers of my safety. In the event of illness or injury, I hereby



consent to whatever x-ray, examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care are considered necessary in the best judgment of the attending physician, surgeon, or dentist and performed by or

under the supervision of a member of the medical staff of the hospital or facility furnishing medical or dental services as deemed necessary for my safety and welfare. It is understood that the resulting expenses will be the responsibility of the participant.

I further acknowledge and understand that my participation in the trip is not an educational requirement for any course of study which I or the student is presently pursuing or may pursue in the future.

As stated in California Education Code Section 35330, I understand that I waive all claims against the District, its officers, agents, volunteers, and employees for any injury, accident, illness, or death occurring during or by reason of this field trip or excursion, including acts of negligence by the District, its officers, agents, volunteers, or employees.

The supervising teacher or sponsor will discuss field trip rules and safety requirements with students and adult chaperones prior to the field trip, which may include dangerous or hazardous conditions or circumstances exposing the students and adults to potential harm or injury, potentially including death. Students and adults are required to obey all rules and safety requirements of the field trip, as well as Codes of Conduct and general standards for respect of persons and property and good behavior.

I fully understand and agree that my failure to follow field trip rules or safety requirements may result in myself being sent home, at my expense, and that I may be barred as a result from future field trips.

I have read the chaperone agreement and will adhere to the above expectations while chaperoning students on a school trip.

Parent's/guardian's name (please print first name and last name): Franklin Nguyen

Parent's/guardian's signature: Franklin Nguyen Date: 6/8/23

School Office Use Only

School office manager has:

- ☐ received Annual Transportation of Students in Privately Owned Vehicles Certificate and Authorization for drivers who are transporting their students in addition to other students
- ☐ received a copy of driver's license
Driver's license expiration date: _____
- ☐ verified that the insurance is in the driver's name
- ☐ verified that the driver has met the minimum insurance requirements as listed above
Insurance expiration date: _____
- ☐ received Field Trip Chaperone Agreement
- ☐ received Volunteer Information/Agreement
- ☐ received a copy of TB Results
- ☐ confirmed Live Scan clearance via Human Resources

I have confirmed that the above individual has been approved as a district chaperone for this field trip.

Principal's signature: [Signature]

Date: 6-8-23