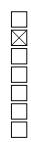
SACRAMENTO CITY UNIFIED SCHOOL DISTRICT BOARD OF EDUCATION

Meeting Date:

Subject: Approve John F. Kennedy field trip to New Orleans, LA April 4, 2024



Division:

Recommendation:

	Sacram	ento City Unified	d School District						
FIELD TRIP REQUEST FORM A SEPARATE FORM FOR EACH TRIP)									
Parent School	is required for	See below	section for details concerning each type of trip.						
Teacher's Name									
Field Trip	0								
		Town (Beyond 50 al Activities	0 mile radius)						
Route (must	written directions our		rlines						
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	1Time _5: <u>30</u> ∫ampn DN will be provided by: □ Walking	g School Bus	Return 7 / 24 Time 2:20						
1		NO (CHECK	with Field Trip Office)						
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Sacramento City Unified School District OUT-OF-STATE OR OUT-OF-COUNTRY

SCOTING!

TRAVEL REQUEST

School N	ппе			ate	
Teacher's Name		;		Telephone #	<u>9/6-832-86</u> 57
Field Trip Destination			am		
Reason for travel		In		e Fes	'val H la
<u></u>	;		<u>/</u>	<u> </u>	n ia . *1
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TRAVEL REQUEST FORM (ACC-F014) Sacramento City Unified School District This form must be econtetert and received in Accounts a de la compañía de l Į۴. Ē f-s , Conference/Workshop F Professional Development ed trip-Continued Education Credits Earned F Business Meeting igh 15 24 Date School/Department Ô h No New Orleans, LA Data(s) of Event 4 4 2 Eveni Title (attach brochure) SEND A COPY OF THI - SONNEL. 2_ Purpose this activity give students, attendees, staff, "(what Avil St How does this travel align with the District's experience P WI in How will this ectivity/event be used and shared? Name of Atlendea(s) 10 € Substitute No. of Days Code Required (attach shaet for additional (Y/N)** 2 C-1112. No 20-000 F Additional Attendees Attached District cost for all atlandees Registration Fee *** Meals included? Print Name ιΓ 8 24 Lodging Transportation Meals Other Signature Superintendent or Desig Page 1 of 1 TOTAL

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