

**SACRAMENTO CITY UNIFIED SCHOOL DISTRICT  
BOARD OF EDUCATION**

Agenda Item# 10.1d

**Meeting Date:** May 5, 2022

**Subject:** Approve Sutter

**FIELD TRIP REQUEST FORM**  
(USE A SEPARATE FORM FOR EACH TRIP)

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

School Name: Gutter Middle School

Date: January 01 2022

Teacher's Name: Lady Connerman Room #: 301 Telephone #: 916-395-5370 Fax #: 916-264-3436

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

School Name: **Sutter Middle School**

Date: Completed: **02/07/202**

Teacher's Name: **Jody B. Cooperman** Room # **301** Telephone # **916-204-3226** (cell)

Field Trip Destination: **Boston, Massachusetts**

**Reason for travel: This field trip is a culmination of our study in U.S. History. We will be visiting sites that directly correlate to our study: Bunker Hill, Lexington and Concord, the USS Constitution, the Black Heritage Trail, the Freedom Trail and Salem.**

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 proof of contract or waiver to Risk Management for review before signing.

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**TRAVEL REQUEST FORM (ACC-F014)**

Sacramento Unified School District

**Instructions: This form must be**

**Purpose for Attending:**

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- Conference/Workshop       Professional Development  
 Business Meeting           Continued Education Credits Earned      REQ 7

Requested by: [Redacted]      Date: Feb 14, 2022

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Date(s) of Event: 5/15/22-5/20/22      Location: Boston, Massachusetts

Event Title (attach brochure)

Purpose: S. History field trip with 8th grade students

\*What does this activity give students, attendees, staff,

How does this travel align with the District's strategic

How will this activity/event be used and shared?

Name of Attendee(s) (attach sheet for additional attendees)	Position	Substitute (Y/N)*	No. of Days Required	Budget Code
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[Redacted]	Teacher	No		
[Redacted]	Teacher	No		
[Redacted]	Teacher	No		

Katie Poole	Teacher	No
Paula Turner	Teacher	No
Andrea Zarate	Teacher	No

Additional Attendees Attached

*Chad Sweitzer, JAS*

4.522

District cost for all attendees

Registration Fee \*\*\* 0.00

2 / 17 / 22

Meals included?

Head & Print Name

Date



Adult Chaperones  
Boston, Massachusetts  
Sutter Middle School  
May 15 -20, 2022

Cooperman · Jody Head Teacher

Turner · Paula Teacher

Campa-Rodriguez Mercedes Teacher

Payne Michele SCUSD Employee

Cooperman-Earl Joshua Adult

Brocchini Samuel Adult

Broderick Rosemary SCUSD Substitute

Broderick Catherine Adult

Zarate Andrea Teacher

Florence Susan Adult

Fletcher Patricia Adult