



Board Office Use: Legislative File Info.	
File ID Number	13-0638
Introduction Date	4/24/13
Enactment Number	13-0669
Enactment Date	4/24/13 <i>S.L.</i>

Memo

To Board of Education
From Anthony Smith, Superintendent
Board Meeting Date 4/24/13
Subject Approval of Request for Student Travel

Action Requested	<input checked="" type="checkbox"/> Approval of request for student travel of <u>Fremont/Skyline</u> to <u>Nashville, TN-Montgomery Bell Academy</u> for the period of <u>4/12/2013</u> through <u>4/14/2013</u> . Grade(s): <u>10 & 12</u> # of Students: <u>4</u> # of Adults: <u>4</u> <input checked="" type="checkbox"/> Ratification of Educational Organization Contract with _____
Educational Purpose of Trip	The mission of the tournament is to conduct a student-friendly event that promotes the values and norms of the high school coaching community. The National Debate Coaches Association wants to host an event that encourages regional debate. Our strong belief is that a qualifying tournament that values all tournament can help promote regional debate immediately. Promoting regional debate is a core mission of the National Debate Coaches Association and we believe it is essential for the continued health of our activity.
Itinerary and activities	Students will fly into Nashville, TN and stay the night at the Radisson Hotel at the Nashville airport located at 1112 Airport center drive. On Saturday April 13th students will go to Montgomery Bell Academy to compete in 4 rounds of policy debate, and then return to the hotel for the night. On Sunday, April 14th students will return to the school for two more rounds of debate and then fly back to SFO airport at 7:00P.M, April 14, 2013
Teachers and Staff Attending Trip	Steve Clemmons Teachers
Site Administrator Affirms	<input type="checkbox"/> Parental permission forms will be on file for all students participating and school has emergency communication protocol <input type="checkbox"/> At least one OUSD employee accompanying the students is certificated <input type="checkbox"/> Non-OUSD chaperones, if any, will meet criminal background check requirements <input type="checkbox"/> There will be sufficient and appropriate chaperones for this field trip <input type="checkbox"/> School will address financial or accessibility issues that might prevent students from participating
Recommendation	<input checked="" type="checkbox"/> Approval of request for student travel of <u>Fremont/Skyline</u> to <u>Nashville, TN-Montgomery Bell Academy</u> for the period of <u>4/12/2013</u> through <u>4/14/2013</u> . <input checked="" type="checkbox"/> Ratification of Educational Organization Contract with _____
Fiscal Impact	Amount of District funds to be used for trip costs will be \$ <u>N/A</u> Funding source for the trip will be: <input type="checkbox"/> General funds <input type="checkbox"/> Restricted funds <input checked="" type="checkbox"/> No District funds will be used

RESOLUTION
OF THE
BOARD OF EDUCATION
OF THE
OAKLAND UNIFIED SCHOOL DISTRICT

Resolution NO 1213-0132
AUTHORIZATION FOR APPROVAL OF STUDENT TRAVEL

WHEREAS, the Board of Education believes that field trips and other travel opportunities for students are a valuable tool in supporting classroom instruction and promoting students awareness of places and events;

WHEREAS, Board Policy 6143 requires the Board of Education of the Oakland Unified School District to pool all trips involving out-of-state and out-of-country travel; and

WHEREAS, pursuant to Board Policy 6143, the Superintendent request the Board of Education to authorize student travel for the period of April 12, 2013 through April 14, 2013 to National Debate Coaches Association National Championship by Skyline High School,

NOW, THEREFORE, BE IT RESOLVED, the Board of Education of the Oakland Unified School District does hereby approve the following request for student travel: Skyline/ Fremont High School: Leadership, Curriculum, and Instruction- Bay Area Urban Debate League

School: Skyline High School/ Fremont High School
Destination: National Debate Coaches Association National Championship, Nashville Tennessee
Departure Date: 4/12/2013 Return: 4/14/2013

Passed by the following vote:


AYES: Jody London, Roseann Torres, James Harris, Vice President Jumoke Hinton Hodge
President David Kakishiba

NOES: None

ABSTENTIONS: None

ABSENCES: Gary Yee, Christopher Dobbins

I hereby certify that the foregoing is a full, true and correct copy of resolution adopted by the Governing Board of the Oakland Unified School District at a Regular Meeting held March 24, 2013.



Edgar Rakestraw, Jr.

Secretary, Governing Board

File ID Number: 13-0638
Introduction Date: 4/24/13
Enactment Number: 13-0664
Enactment Date: 4/24/13
By: o.s.



Basic Directions

1. Requests must be submitted to Network Executive Officer no later than **120 days** prior to departure
2. Board approval is required for all out of state trips.
3. Use of Restricted Funds requires additional approval by State & Federal Compliance
4. OUSD Fingerprint and TB clearance requirements per OUSD AR 1240 has been obtained for all non-District employee chaperones. (Arrange through <https://www.beamentor.org/Linkpages/mentorasp/SpecialProjects/OUSD/> or email volunteers@ousd.k12.ca.us. Continuing volunteer chaperones must be fingerprint cleared at least once every 3 years and obtain TB clearance once every 4 years.)
5. Generally 1:10 Adult to Student ratio is required as provided in OUSD Board Policy 6153
6. Check the Pre-Approved Vendor List for contract and insurance requirements

Required Documents for Request Approval	<input checked="" type="checkbox"/> Copy of program/vendor information describing vendor and scheduled activities <input checked="" type="checkbox"/> All facility, program or vendor agreements/contracts, including OUSD Educational Organization Contract <input checked="" type="checkbox"/> Certificate of insurance from all private vendors: Facility (attach copy unless publicly owned and operated or commercial lodging e.g. Holiday Inn) Program (attach copy unless publicly owned and operated) <input checked="" type="checkbox"/> Board Approval Memo
Required Documents for Trip Approval	<input type="checkbox"/> "Checklist Prior to Trip Departure" <input type="checkbox"/> List of students and adults attending trip <input type="checkbox"/> "Declaration of Driver" and required attachments, completed by each driver of private or rental vehicle

TRIP INFORMATION TO BE COMPLETED BY TEACHER:

School or Center: Fremont/Skyline Site Number: 302/306

Destination: <u>Nashville, TN-Montgomery Bell Academy</u>
Address: <u>4001 Harding Pike, Nashville, TN. 37205</u> Phone: <u>(615) 298-5514</u>

Date of Departure: 4/12/2013 Time of Departure: 3:40 a.m Place of Departure: SFO

Date of Return: 4/14/2013 Time of Return: 11:25a.m Place of Return: SFO

Class(es) or Group Attending: Fremont:Alex Grubbs(10) Diego Garcia(12)Skyline:Hector Contreras, Elisa Saavedra(12)

Grade(s): 10 &12 # of Students: 4 # of Adults: 4

Teacher Supervising Trip: Steve Clemmons Emergency Contact # during trip: (510) 289-7467

Supervising teacher's email address: sclemmons@hotmail.com

Describe itinerary and activities: <input type="checkbox"/> Trip will include swim or water activities)	Students will fly into Nashville, TN and stay the night at the Radisson Hotel at the Nashville airport located at 1112 Airport center drive. On Saturday April 13th students will go to Montgomery Bell Academy to compete in 4 rounds of policy debate, and then return to the hotel for the night. On Sunday, April 14th students will return to the school for two more rounds of debate and then fly back to SFO airport at 7:00P.M, April 14, 2013
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Names of Teachers and staff attending trip:	Teachers: Steve Clemmons Teachers Staff:
Describe mode of transportation for each leg of the trip:	SFO To: Nashville Airport and Nashville to SFO using southwest airlines
Describe how this trip aligns with grade level standards, supports the teaching and learning and/or parent ed/training component of site plan, including related activities prior to trip and student follow-up activities that will occur after the field trip/excursion:	The mission of the tournament is to conduct a student-friendly event that promotes the values and norms of the high school coaching community. The National Debate Coaches Association wants to host an event that encourages regional debate. Our strong belief is that a qualifying tournament that values all tournament can help promote regional debate immediately. Promoting regional debate is a core mission of the National Debate Coaches Association and we believe it is essential for the continued health of our activity.

TRIP COSTS

Funding source for the trip will be: General Funds Restricted funds No District funds will be used

TRANSPORTATION

Note: Site must order AC Transit and BART tickets.

If buses will be used, the approved bus company list is located on the Intranet with the Field Trip information.

of buses ordered: _____ Size of bus ordered: _____ Wheelchair accessible needed? _____

Bus Company: _____ Cost of transportation: \$ _____ Restricted funds? _____

Charter Bus Account: Org. Key _____ Object: **5826** Charter Bus PO #: _____

ADMISSION COSTS

Cost per student: \$ _____ Cost per adult: \$ _____ Total cost: \$ _____ Restricted funds? _____

Admission Account: Org. Key _____ Object **5829** Admissions PO #: _____

SUBSTITUTES Are Subs Needed? Yes: No: (Note: School site is responsible for ordering substitutes)

CERTIFICATES OF INSURANCE

Facility/Program Insurance: Attach copies of Proof of Insurance from all private vendors (except publicly owned and operated).

District Insurance: Has vendor requested that OUSD provide a certificate of the District's insurance? Yes: No:

If yes, attach the written requirements provided by the Facility. (Once the Certificate of Insurance is prepared, it will be faxed to the contact person at the facility and the school site contact. The original certificate will then be sent to the school site contact and will be given to the facility if required.)

STATE & FEDERAL COMPLIANCE

If restricted funds are used for this field trip/excursion, State & Federal Compliance approval is required.

1. Attach a copy of the site plan, if modified.
2. Documentation of the follow up activities is to be maintained at the site for State and Federal compliance review.



FIELD TRIP/EXCURSION INFORMATION
DESTINATION OUTSIDE OF CALIFORNIA
(to be kept by Parent/Guardian)

TO BE COMPLETED BY TEACHER

School or Center: _____ Fremont/Skyline _____

Field Trip Location and Address: Nashville, TN-Montgomery Bell Academy 4001 Harding Pike, Nashville, TN. 37205

Date of Departure: 4/12/2013 Time of Departure: 3:40 a.m Place of Departure: SFO

Date of Return: 4/14/2013 Time of Return: 11:25a.m Place of Return: SFO

Class or Group Attending: Fremont:Alex Grubbs(10) Diego Garcia(12)Skyline:Hector Contreras, Elisa Saavedra(12)
Steve Clemmons Teachers

Name(s) of classroom teacher(s): _____

Teacher Supervising Trip: Steve Clemmons Emergency Contact # during trip: (510) 289-7467

<p>The field trip will involve the following: (Describe activities and itinerary):</p> <p>(<input type="checkbox"/> Swim permission required below.)</p>	<p>Students will fly into Nashville, TN and stay the night at the Radisson Hotel at the Nashville airport located at 1112 Airport center drive. On Saturday April 13th students will go to Montgomery Bell Academy to compete in 4 rounds of policy debate, and then return to the hotel for the night. On Sunday, April 14th students will return to the school for two more rounds of debate and then fly back to SFO airport at 7:00P.M, April 14, 2013</p>
<p>Mode(s) of transportation:</p>	<p>SFO To: Nashville Airport and Nashville to SFO using southwest airlines</p>
<p>Student needs to bring:</p>	



**OUT OF STATE
FIELD TRIP/EXCURSION REQUEST**

Site: 302
 Teacher Supervising Trip: Steve Clemmons
 Destination: Nashville TN
 Trip Departure Date: 4/12/13

APPROVAL OF REQUEST	Signature	Check One		Date
		Approved	Denied	
Site Administrator <input checked="" type="checkbox"/> Trip aligns with grade level standards <input checked="" type="checkbox"/> Trip purpose, supervision plan, transportation, safety parameters and funding are appropriate <input checked="" type="checkbox"/> Reviewed agreements/contracts with any facility, program or vendor (attach copies) <input checked="" type="checkbox"/> Organization(s) involved in the trip have expertise in operating student trips		<input checked="" type="checkbox"/>	<input type="checkbox"/>	3/29/13
Network Executive Officer <input checked="" type="checkbox"/> Trip purpose, transportation, and funding are appropriate <input checked="" type="checkbox"/> Organization(s) involved in the trip have expertise in operating student trips		<input type="checkbox"/>	<input type="checkbox"/>	
State/Federal Compliance (if restricted funds) <input type="checkbox"/> Compliant use of resources and in alignment with school site plan (SPSA)		<input type="checkbox"/>	<input type="checkbox"/>	
Risk Management <input checked="" type="checkbox"/> Business contracts, insurance, safety and policy compliance are sufficient <input checked="" type="checkbox"/> Notify Site of conditional approval of Request pending receipt of the completed Checklist Prior to Trip Departure (and attachments)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	4/4/2013

APPROVAL OF TRIP	Signature	Check One		Date
		Approved	Denied	
Site Administrator <input checked="" type="checkbox"/> Forward the completed : (1) Checklist Prior to Trip Departure; (2) list of students and adults attending trip; (3) "Declaration of Driver" and required attachments, completed by each driver of private or rental vehicle		<input checked="" type="checkbox"/>	<input type="checkbox"/>	3/29/13
Risk Management <input checked="" type="checkbox"/> Confirm receipt of completed Checklist, list of students/adults, and Declarations of Driver <input checked="" type="checkbox"/> Notify Site of Trip Approval once approved by Superintendent		<input checked="" type="checkbox"/>	<input type="checkbox"/>	4/4/2013
Superintendent <input type="checkbox"/> Approve/disapprove trip <input type="checkbox"/> Returns Request Form to Risk Management		<input checked="" type="checkbox"/>	<input type="checkbox"/>	



OUT OF STATE FIELD TRIP/EXCURSION REQUEST

Site: 302
Teacher Supervising Trip: Steve Clemmons
Destination: Nashville TN
Trip Departure Date: 4/12/13

CHECKLIST TO BE COMPLETED BY SITE ADMINISTRATOR PRIOR TO TRIP DEPARTURE

(initial each item certifying completion)

- Initials: [Handwritten initials]
- "OUSD Student Field Trip/Excursion Permission Slip" has been signed by parent(s)/guardian(s) of all student participants.
- "Adult Participant Field Trip/Excursion Chaperone Agreement" signed by all non-District employee chaperones.
- OUSD Fingerprint and TB clearance requirements per OUSD AR 1240 have been obtained for all non-District employee chaperones.
- No student has been prevented from making a trip due to lack of sufficient funds.
- No District funds will be used to pay for "pupil expenses" on out of state trips unless waiver of Education Code 35330(b)(3) is granted by OUSD Board of Education and the State Board of Education. Pupil expenses include meals, sundries, lodging, etc. (District funds may be used to pay transportation costs or direct educational program costs.)
- Meeting held for staff, noncertificated adults, parent(s)/guardian(s) and students in advance of trip to discuss trip and safety related procedures, itinerary and questions as required by OUSD AR 6153. Meeting date:
- Health Conditions/Medication: Trip participant health information has been gathered and reviewed and any needed revisions to supervision plan made, including making sure that chaperones understand relevant information (e.g., food allergies). A plan has been developed to collect, secure, and dispense prescription medications from their original containers and consistent with physician's instructions. (See OUSD AR 5141.21)
- Supervision is by certificated personnel and assisted by other school employees, parent(s)/guardian(s), or other authorized chaperones who are at least 21 years old. Site Administrator and Teacher/lead trip staff are satisfied all chaperones are willing and able to perform required duties, including understanding and implementing instructions, understanding health information for students in their group and responding effectively in the event of an emergency.
- Adult to Student Ratio is at least 1:10 as required by OUSD BP 6153 (or higher if high risk activities).
- Sleeping arrangements and night supervision are safe and appropriate.
- Safety requirements have been met (e.g., first aid kits, emergency contact and health info, instructions for chaperones, cell phones). At least one adult has current First Aid/CPR training.
- Confirm that: (1) if destination is out of Oakland, arrangements have been made for use of an additional vehicle in event of illness or emergency and (2) students received instruction in safe conduct on bus or other transport.
- OUSD Declaration of Driver form completed and signed by driver and registered owners of any private vehicles used on trip and copy of proof of insurance and California driver's license are on file and secured at school site. The same forms may be used for multiple trips or for entire school year as long as insurance proof on file is updated. This requirement does not apply to licensed bus companies on the District's approved bus list or for public transportation entities, airlines or AMTRAK.
- [] Water Activities: OUSD "Procedures for Fields Trips including Swim or Water Activities" have been met.
- Confirm all student participants on higher risk activities (e.g. swimming, snow trips, horseback riding, sailing, rafting, etc) are covered by medical or accident insurance as required by AR 6153. Do not exclude students without insurance; however, contact Risk Management for instructions.
- Site and trip leader has a list of students and adults attending trip.

TRIP APPROVAL IS CONDITIONED ON COMPLETION OF THIS CHECKLIST



**OUT OF STATE
FIELD TRIP/EXCURSION REQUEST**

Site: 306
 Teacher Supervising Trip: Steve Clemmons
 Destination: Nashville, TN
 Trip Departure Date: 4/12/13

APPROVAL OF REQUEST	Signature	Check One		Date
		Approved	Denied	
Site Administrator <input checked="" type="checkbox"/> Trip aligns with grade level standards <input checked="" type="checkbox"/> Trip purpose, supervision plan, transportation, safety parameters and funding are appropriate <input checked="" type="checkbox"/> Reviewed agreements/contracts with any facility, program or vendor (attach copies) <input checked="" type="checkbox"/> Organization(s) involved in the trip have expertise in operating student trips		✓		3/20/13
Network Executive Officer <input checked="" type="checkbox"/> Trip purpose, transportation, and funding are appropriate <input checked="" type="checkbox"/> Organization(s) involved in the trip have expertise in operating student trips				
State/Federal Compliance (if restricted funds) <input type="checkbox"/> Compliant use of resources and in alignment with school site plan (SPSA)				
Risk Management <input checked="" type="checkbox"/> Business contracts, insurance, safety and policy compliance are sufficient <input checked="" type="checkbox"/> Notify Site of conditional approval of Request pending receipt of the completed Checklist Prior to Trip Departure (and attachments)		✓		4/4/2013

APPROVAL OF TRIP	Signature	Check One		Date
		Approved	Denied	
Site Administrator <input checked="" type="checkbox"/> Forward the completed : (1) Checklist Prior to Trip Departure; (2) list of students and adults attending trip; (3) "Declaration of Driver" and required attachments, completed by each driver of private or rental vehicle		✓		3/20/13
Risk Management <input checked="" type="checkbox"/> Confirm receipt of completed Checklist, list of students/adults, and Declarations of Driver <input type="checkbox"/> Notify Site of Trip Approval once approved by Superintendent		✓		4/4/2013
Superintendent <input type="checkbox"/> Approve/disapprove trip <input type="checkbox"/> Returns Request Form to Risk Management				



OUT OF STATE FIELD TRIP/EXCURSION REQUEST

Site: 306
Teacher Supervising Trip: Scheer / Clemens
Destination: Washington DC / Nashville
Trip Departure Date:

CHECKLIST TO BE COMPLETED BY SITE ADMINISTRATOR PRIOR TO TRIP DEPARTURE (initial each item certifying completion)

- VT OUSD Student Field Trip/Excursion Permission Slip has been signed by parent(s)/guardian(s) of all student participants.
VT Adult Participant Field Trip/Excursion Chaperone Agreement signed by all non-District employee chaperones.
VT OUSD Fingerprint and TB clearance requirements per OUSD AR 1240 have been obtained for all non-District employee chaperones.
VT No student has been prevented from making a trip due to lack of sufficient funds.
VT No District funds will be used to pay for pupil expenses on out of state trips unless waiver of Education Code 35330(b)(3) is granted by OUSD Board of Education and the State Board of Education.
? VT Meeting held for staff, noncertificated adults, parent(s)/guardian(s) and students in advance of trip to discuss trip and safety related procedures, itinerary and questions as required by OUSD AR 6153.
? Health Conditions/Medication: Trip participant health information has been gathered and reviewed and any needed revisions to supervision plan made, including making sure that chaperones understand relevant information (e.g., food allergies).
VT Supervision is by certificated personnel and assisted by other school employees, parent(s)/guardian(s), or other authorized chaperones who are at least 21 years old.
VT Adult to Student Ratio is at least 1:10 as required by OUSD BP 6153 (or higher if high risk activities).
VT Sleeping arrangements and night supervision are safe and appropriate.
VT Safety requirements have been met (e.g., first aid kits, emergency contact and health info, instructions for chaperones, cell phones). At least one adult has current First Aid/CPR training.
VT Confirm that: (1) if destination is out of Oakland, arrangements have been made for use of an additional vehicle in event of illness or emergency and (2) students received instruction in safe conduct on bus or other transport.
VT OUSD Declaration of Driver form completed and signed by driver and registered owners of any private vehicles used on trip and copy of proof of insurance and California driver's license are on file and secured at school site.
ia VT Water Activities: OUSD Procedures for Fields Trips including Swim or Water Activities have been met.
Confirm all student participants on higher risk activities (e.g. swimming, snow trips, horseback riding, sailing, rafting, etc) are covered by medical or accident insurance as required by AR 6153. Do not exclude students without insurance; however, contact Risk Management for instructions.
VT Site and trip leader has a list of students and adults attending trip.

TRIP APPROVAL IS CONDITIONED ON COMPLETION OF THIS CHECKLIST



BAY AREA URBAN DEBATE LEAGUE

287 17th St • Oakland, CA 94612
www.baudl.org • 510.517.0069 • info@baudl.org

2013 NDCA Championship
Bay Area Urban Debate League- OUSD Participant List

Students

Elisa Saavedra (Skyline High School)
Hector Contreras (Skyline High School)
Diego Garcia (Fremont- Media Academy)
Alex Grubbs (Fremont- Media Academy)

Adults

Steven Clemmons (Teacher, Skyline High School)



2013 NDCA National Championship Montgomery Bell Academy

Mission Statement:

The mission of the tournament is to conduct a student-friendly event that promotes the values and norms of the high school coaching community. The NDCA wants to host an event that encourages regional debate. Our strong belief is that a qualifying tournament that values all tournaments can help promote regional debate immediately. Promoting regional debate is a core mission of the NDCA and we believe it is essential for the continued health of our activity.

Description:

The 2013 tournament will be hosted by Montgomery Bell Academy in Nashville, TN.

The tournament will offer 6 preliminary rounds of competition in one open division of policy debate, one open division of Lincoln-Douglas debate and one open division of Public Forum debate. The tournament will offer 3 sessions of debate in one open division of Congressional Debate. The tournament will be held on April 12-15, 2013 with registration on Friday, April 12.

All debaters winning at least four preliminary rounds will advance to elimination rounds in LD, Policy and PF. Congress will advance to a Supersession.

Topics:

The Lincoln Douglas division will use the National Forensic Leagues January/February topic:
Resolved: Rehabilitation ought to be valued above retribution in the United States criminal justice system.

The Policy division will use the 2012-2013 NFL topic:
Resolved: The United States federal government should substantially increase its transportation infrastructure investment in the United States.

The Public Forum division will use the NFL April topic, which will be announced on March 1st.

Congressional debate legislation should be submitted to ndca-bills@tabroom.com by April 1st.



2013 NDCA Championships
Dates: 4/12/2013 - 4/15/2013



2013 NDCA National Championship Montgomery Bell Academy

Friday, April 12th

5:00 – 9:00 pm – onsite confirmation for schools that have paid fees.

If you have paid your fees and don't have any changes you can register via the joyoftournaments onsite confirmation procedure. If you have changes that require talking to someone in person or you need to pay fees you will be able to meet with a member of the tournament staff at the Nashville Airport Marriott.

Saturday, April 13th – Montgomery Bell Academy

8:00 am – Round 1 and 2 pairings released

8:30 am – Student Congress opening meeting

9:00 am – Round 1 & Congress Session I

11:00 am – Round 2

1:00 pm – Lunch

3:30 pm – Round 3 & Congress Session II

6:30 pm – Round 4

Sunday, April 14th – Montgomery Bell Academy

8:00 am – Round 5 pairings released

9:00 am – Round 5 & Congress Session III

11:00 am – Lunch

Noon – Round 6 & Congress Super Session

3:00 pm – Elimination Round 1

6:00 pm – Awards

7:00 pm – Elimination Round 2

Monday, April 15th – Nashville Airport Marriott

7:30 am – Pairings released

8:00 am – Elimination Round 3

11:00 am – Elimination Round 4

2:00 pm – Elimination Round 5 (if necessary)

5:00 pm – Elimination Round 6 (if necessary)

In both preliminary and elimination round competition forfeit time is fifteen minutes after the announced start time of each round. Only a member of the tab room committee or their designee may declare a debate a forfeit due to the late arrival of a team. The tournament committee will strive to create an announced start time that is at least thirty minutes after the release of the pairings for each round. On Day 1 and 2 the forfeit rule will be strictly enforced.

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Field trips are important as they extend classroom learning experiences and give students opportunities to relate education to the world outside school. However, field trips are voluntary and students are not required to attend. Alternate learning activities are provided for those who do not go.

302

TO BE COMPLETED BY PARENT/GUARDIAN

I give permission for my daughter/son/ward _____ Diego Garcia _____
(Name of Student – please print)

to participate in a field trip to: Nashville, TN Date(s): 4/12/13 - 4/14/13

Emergency Contact Number(s) for Parent/Guardian: 1. 510 282-4721 2. 510 562 1913

Alternate Emergency Contact Name: Monica Trevino Phone Number(s): 510 375 1393

Student's Critical Medical Needs/Medications/Allergies/Conditions: _____

Health Insurance Plan Name¹: _____ Subscriber/Policy No. _____

Swim Permission – If swimming is a part of the field trip, do you give permission for your daughter/son/ward to participate in swimming activities? Yes No _____

My child's swimming ability is (check one): Beginner _____ Intermediate _____ Advanced 1

Authorization to treat minor: In the event that I, or other parent/guardian, cannot be contacted, I hereby give permission to the School staff to secure proper treatment for my daughter/son/ward.

Notice of Waiver of All Claims: I hereby knowingly waive all of my and my daughter's/son's/ward's claims against any school district, charter school, and/or the State of California for injury, accident, illness or death occurring during or by reason of the out-of state field trip or excursion. (Education Code Section 35330)

Date: 3-15-13 Parent or Guardian Signature: _____

Print Name: Ludivina Zamora

FOR HIGH SCHOOLS ONLY: With the permission of the parent/guardian and the supervising teacher, a high school student may meet at and/or leave from the destination on his/her own. Please check below if you grant permission to your high school student to arrive at or leave the destination on his/her own. Under this option, OUSD and the School are not liable for any incidents that may occur.
_____ My high school student will arrive at the destination on his/her own.
_____ My high school student will leave the destination on his/her own.

¹ Oakland Unified School District does not provide insurance for this field trip/excursion, although optional insurance is available for purchase at <https://studentinsuranceusa.com/> (click on the link to K-12 Plans).



Field trips are important as they extend classroom learning experiences and give students opportunities to relate education to the world outside school. However, field trips are voluntary and students are not required to attend. Alternate learning activities are provided for those who do not go.

TO BE COMPLETED BY PARENT/GUARDIAN

302

I give permission for my daughter/son/ward Alexander Grubbs
(Name of Student – please print)

to participate in a field trip to: Nashville, TN Debate Tournament Date(s): 4/12-14/13

Emergency Contact Number(s) for Parent/Guardian: 1. 510-479-2268 2. 510-575-6845 3. _____

Alternate Emergency Contact Name: Judy Acosta Phone Number(s): 510-878-8438

Student's Critical Medical Needs/Medications/Allergies/Conditions: None

Health Insurance Plan Name¹: Alameda Alliance Subscriber/Policy No. 000273798-01

Swim Permission – If swimming is a part of the field trip, do you give permission for your daughter/son/ward to participate in swimming activities? Yes No _____

My child's swimming ability is (check one): Beginner _____ Intermediate _____ Advanced

Authorization to treat minor: In the event that I, or other parent/guardian, cannot be contacted, I hereby give permission to the School staff to secure proper treatment for my daughter/son/ward.

Notice of Waiver of All Claims: I hereby knowingly waive all of my and my daughter's/son's/ward's claims against any school district, charter school, and/or the State of California for injury, accident, illness or death occurring during or by reason of the out-of state field trip or excursion. (Education Code Section 35330)

Date: 3/15/13 Parent or Guardian Signature: Andrew Grubbs

Print Name: Andrew Grubbs

FOR HIGH SCHOOLS ONLY: With the permission of the parent/guardian and the supervising teacher, a high school student may meet at and/or leave from the destination on his/her own. Please check below if you grant permission to your high school student to arrive at or leave the destination on his/her own. Under this option, OUSD and the School are not liable for any incidents that may occur.
_____ My high school student will arrive at the destination on his/her own.
_____ My high school student will leave the destination on his/her own.

¹ Oakland Unified School District does not provide insurance for this field trip/excursion, although optional insurance is available for purchase at <https://studentinsuranceusa.com/> (click on the link to K-12 Plans).



Field trips are important as they extend classroom learning experiences and give students opportunities to relate education to the world outside school. However, field trips are voluntary and students are not required to attend. Alternate learning activities are provided for those who do not go.

TO BE COMPLETED BY PARENT/GUARDIAN

306

I give permission for my daughter/son/ward Elisa Saavedra
(Nashville Tennessee) (Name of Student - please print)

to participate in a field trip to: NCA Championship Tournament Date(s): 4/12-14/2013

Emergency Contact Number(s) for Parent/Guardian: 1. 510 533-5113 2. 510 205-8278 3. 510 967-2159

Alternate Emergency Contact Name: Richard Rivera Phone Number(s): 510 325-5259

Student's Critical Medical Needs/ Medications /Allergies/Conditions: Amoxicillin

Health Insurance Plan Name¹: Blue Cross/Blue Shield Subscriber/Policy No. R57731767

Swim Permission - If swimming is a part of the field trip, do you give permission for your daughter/son/ward to participate in swimming activities? Yes _____ No _____

My child's swimming ability is (check one): Beginner _____ Intermediate _____ Advanced _____

Authorization to treat minor: In the event that I, or other parent/guardian, cannot be contacted, I hereby give permission to the School staff to secure proper treatment for my daughter/son/ward.

Notice of Waiver of All Claims: I hereby knowingly waive all of my and my daughter's/son's/ward's claims against any school district, charter school, and/or the State of California for injury, accident, illness or death occurring during or by reason of the out-of state field trip or excursion. (Education Code Section 35330)

Date: 3-18-13 Parent or Guardian Signature: Annette Saavedra

Print Name: Annette Saavedra

FOR HIGH SCHOOLS ONLY: With the permission of the parent/guardian and the supervising teacher, a high school student may meet at and/or leave from the destination on his/her own. Please check below if you grant permission to your high school student to arrive at or leave the destination on his/her own. Under this option, OUSD and the School are not liable for any incidents that may occur.

_____ My high school student will arrive at the destination on his/her own.

_____ My high school student will leave the destination on his/her own.

¹ Oakland Unified School District does not provide insurance for this field trip/excursion, although optional insurance is available for purchase at <https://studentinsuranceusa.com/> (click on the link to K-12 Plans).



Field trips are important as they extend classroom learning experiences and give students opportunities to relate education to the world outside school. However, field trips are voluntary and students are not required to attend. Alternate learning activities are provided for those who do not go.

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TO BE COMPLETED BY PARENT/GUARDIAN

I give permission for my daughter/son/ward Hector Contreras - Ramazzini
(Name of Student - please print)

to participate in a field trip to: NACA Date(s): _____

Emergency Contact Number(s) for Parent/Guardian: 1. (510) 381-1492 2. (510) 381-5306 3. (510) 4773-5076

Alternate Emergency Contact Name: _____ Phone Number(s): _____

Student's Critical Medical Needs/Medications/Allergies/Conditions: N/A

Health Insurance Plan Name¹: _____ Subscriber/Policy No. _____

Swim Permission - If swimming is a part of the field trip, do you give permission for your daughter/son/ward to participate in swimming activities? Yes _____ No _____

My child's swimming ability is (check one): Beginner _____ Intermediate _____ Advanced _____

Authorization to treat minor: In the event that I, or other parent/guardian, cannot be contacted, I hereby give permission to the School staff to secure proper treatment for my daughter/son/ward.

Notice of Waiver of All Claims: I hereby knowingly waive all of my and my daughter's/son's/ward's claims against any school district, charter school, and/or the State of California for injury, accident, illness or death occurring during or by reason of the out-of state field trip or excursion. (Education Code Section 35330)

Date: 3/19/13 Parent or Guardian Signature: Maria Ramazzini
Print Name: Maria Ramazzini

FOR HIGH SCHOOLS ONLY: With the permission of the parent/guardian and the supervising teacher, a high school student may meet at and/or leave from the destination on his/her own. Please check below if you grant permission to your high school student to arrive at or leave the destination on his/her own. Under this option, OUSD and the School are not liable for any incidents that may occur.
_____ My high school student will arrive at the destination on his/her own.
_____ My high school student will leave the destination on his/her own.

¹ Oakland Unified School District does not provide insurance for this field trip/excursion, although optional insurance is available for purchase at <https://studentinsuranceusa.com/> (click on the link to K-12 Plans).



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/8/2013

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Lambert Risk Management Services, Inc One North LaSalle Street 35th Floor Chicago IL 60602	CONTACT NAME: Steve Park PHONE (A/C, No, Ext): (312) 220-9200 E-MAIL ADDRESS: steve_park@lambent-rms.com		FAX (A/C, No): (312) 220-0117
	INSURER(S) AFFORDING COVERAGE		NAIC #
INSURED Bay Area Urban Debate Commission 285 17th Street Oakland CA 94612	INSURER A: Mount Vernon Fire Insurance Co.		26522
	INSURER B: Federal Insurance Co.		
	INSURER C:		
	INSURER D:		
	INSURER E:		
	INSURER F:		

COVERAGES

CERTIFICATE NUMBER: CL133804099

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC			NPP2550922C	2/1/2013	2/1/2014	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB OCCUR CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			N/A			WC STATUTORY LIMITS OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
B	DIRECTORS AND OFFICERS			82215338	1/1/2013	1/1/2014	LIMIT \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 Evidence of Coverage

CERTIFICATE HOLDER**CANCELLATION**

Bay Area Urban Debate Commission

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

S Evans-Wofford/STEVE