

AVID 9th Grade College Campus Tour - February 29, 2016

- Students will miss an entire day of school, and are responsible for making up any missed work
- Students must get parent signature and teacher initials for all classes.
- **Cost is \$30, which will go toward the cost of the bus. Students should also bring about \$10 to purchase lunch at UCLA campus.** *If any student wishes to attend but cannot afford the \$30, please contact Mr. Garnet for options. If students wish to purchase any souvenirs at UCLA, please bring additional money as needed; there will be time to visit the UCLA Store at lunch.*

Only 40 spaces are available! I will take the first FORTY students who bring a completed permission slip with ALL the signatures, contact information, etc. filled in AND pay the \$30.

Tentative Itinerary

8:00am Students gather at bus pickup spot at Peninsula HS and check in with Mr. Garnet

8:30am Bus departs for El Camino College

(Est. travel time 30-50 min.)

9:30am Tour @ El Camino College

10:30am Tour ends, bathroom stop before getting on bus, head count

10:45am Depart from El Camino College for UCLA Campus to have lunch

(Est. travel time 40min – 1hour 30 min.)

~12:00pm Arrive at UCLA: Walk to Ackerman Student Union @ UCLA campus for lunch (bring \$10)

Students given free time to eat and explore a bit, but must stay in buddy system. A variety of lunch options are available, including Rubios, Panda Express, Taco Bell, Carl's Jr., etc.

LINK: <http://asucla.ucla.edu/restaurants/>

If you wish to purchase any UCLA themed gear (shirts, mugs, keychains, etc.), please bring additional money as needed, and visit UCLA Store at this time (same building as lunch). See UCLA Store online in advance for an idea of what costs will be.

LINK: <https://shop.uclastore.com/c-312-apparel-accessories.aspx>

1:45pm Begin heading back to meeting spot to meet tour guides, be there by 2pm

2:15pm UCLA tour officially starts – Students will be in 4 prearranged groups of 10

3:15pm Tour ends, all students regroup and head to bus

3:30pm Bus departs for PVPHS

(Est. travel time 50 minutes - 2 hours) Students call or text parents as we get into Torrance

4:45-5:30pm depending on traffic: Arrive at PVPHS, parents pick up students



**PALOS VERDES PENINSULA UNIFIED SCHOOL DISTRICT
OFF-CAMPUS FIELD TRIP AUTHORIZATION - PARENT PERMISSION FORM**

DEAR PARENT:

A trip is planned on (date) MONDAY Feb. 29 to visit (destination) El Camino College & UCLA (Campus Tours). If you wish your son/daughter to attend, please sign and return this consent slip to the school office prior to (date) Feb. 19, 2016. Transportation will leave (school) Peninsula H.S. at (time) 8:30 am and return at approximately (time) 5:00 pm. If further information is desired regarding this trip, please contact (Name of Sponsor) Adam Garnet at (garneta@pvpsd.net)

I give (student name) [redacted] permission to attend the activity. In case of emergency, I may be contacted at () - () - () Parent/Guardian Signature _____ Date _____

METHOD OF TRANSPORTATION

Bus
 No District transportation provided (NOTE: It will be the obligation of the parent/guardian to provide transportation to and from the activity.)
 Automobile, driven by one of the following (check one):
 Parent; Guardian; Self (must complete form F603); Volunteer (Forms 604 (a) and 604 (b) – see attached)

REQUEST TO BE OUT OF CLASS:
(TO BE COMPLETED 10 DAYS PRIOR TO THE DAY OF THE TRIP)

Student _____ Date _____
 I request permission for this student to be excused from Period(s) 0 1 2 3 4 5 6 7 8 on (Date) Feb. 29 to attend (Activity) AVID/Campus tours
 Signature of Teacher Making request: Adam Garnet

Note - The parent should not give permission to participate in the trip until all teachers have initiated. A signature in the "No" column indicates that student's work does not justify his absence from that class. The decision to participate must be made by the parents and the student, keeping in mind the total school program of the student.

CLASS SCHEDULE			
The teacher is to initial under "Yes" or "No" indicating acknowledgment of the absence.			
Period	Subject	Teacher	
		Yes	No
0			
1			
2			
3			
4			
5			
6			
7			
8			

VERIFICATION OF ATTENDANCE

(Student Name) _____ was on a field trip Period(s) 0 1 2 3 4 5 6 7 8 on (Date of Trip) _____
 Teacher Signature: _____ Date: _____

**PALOS VERDES PENINSULA UNIFIED SCHOOL DISTRICT
Acknowledgment of Student Understanding**

As a student participating in an extra- or co-curricula program/activity sponsored by the Palos Verdes Peninsula Unified School District, I agree to comply fully with all school, district, and state regulations pertaining to pupil behavior/conduct.

I understand that the school administration and/or faculty advisor/coach/sponsor has responsibility for supervision and control of all student participants in the specified program/activity and agree to follow their direction during the full duration of the participation period.

I further understand that I will be subject to immediate suspension, administrative transfer, and/or expulsion for any narcotics or alcohol involvement – whether it be for possession, use, and/or sale – as well as for violation of any school, district, Education Code, Administrative Code, or Penal Code provision relating to my behavior or conduct. In addition, I am aware that a violation(s) on my part will result in my being referred to the athletic or activity council at my assigned school for additional disciplinary action as appropriate.

I acknowledge that I have been given a copy of the current disciplinary guidelines governing student behavior and am aware of the consequences contained therein for the specified violations.

Student Participant's Full Name (please print): _____	Signature of Student Participant: _____	Date: _____
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Parent/Guardian Acknowledgment and Authorization

The above student is hereby authorized to participate in the field trips scheduled by the (Full Name of Group, Including School) AVID program, Palos Verdes Peninsula High School on the following date(s): Feb. 29, 2016

I have read the above acknowledgment of student understanding and, as the parent/guardian, am aware that violation of rules and regulations relating to student conduct and/or reasonable directives given by the faculty advisor and/or adult chaperone(s) will result, not only in the corrective actions outlined above, but, in the case of out-of-the-area and/or out-of-state field trips, immediate parent/guardian notification and return of the student at parent/guardian notification and return of the student at parent/guardian expense to his/her home via the next available transportation.

Permission is hereby granted to the faculty advisor and adult chaperone(s) to obtain medical or surgical care from a licensed physician for the student in the event of a serious accident or illness. I understand that every attempt will be made to contact me in any such medical emergency.

Pursuant to Education Code Section 35330, I hereby waive any claim(s) against the Palos Verdes Peninsula Unified School District for injury, accident, or illness occurring during or by reason of the field trip or activity specified above.

Signature of Parent/Guardian: _____ Date: _____
 (NOTE: Out-of-state field trips require parent/guardian signature in presence of a school administrator)

Signature of Principal / Designee _____ Date: _____