

**TO:** Board of Directors  
**FROM:** Ruth Floyd, Executive Director of Business Services  
**SUBJECT:** Student Field Trips  
**DATE:** February 21, 2023  
**TYPE:** Action Required

Stanwood High School student groups request to attend the following events:

- Poultry CDE Clinic - FFA Poultry Eval. Team, March 10-11, 2023, Kennewick, WA
- Livestock Judging - FFA Agriculture Mechanics, March 23-25, 2023, Moses Lake, WA
- TSA<sup>1</sup> State Conference - TSA Chapter Members, March 22-25, 2023, SeaTac, WA
- WCTSMA<sup>2</sup> State - Sports Medicine Members, April 27-29, 2023, Spokane, WA

Elementary Schools request to attend the following outdoor education camps below:

YMCA Camp Orkila - Elger Bay 5th Grade, June 5-7, 2023, Orcas Island, WA  
YMCA Camp Orkila - Cedarhome 5th Grade, June 7-9, 2023, Orcas Island, WA  
YMCA Camp Seymour - Twin City 5th Grade, May 1-3, 2023, Gig Harbor, WA

**Recommendation: It is recommended that the Board approve the above field trips for these student groups.**

<sup>1</sup>TSA: Technology Student Association

<sup>2</sup>WCTSMA: Washington Career and Technical Sports Medicine Association

# NON-LOCAL, OVERNIGHT & EXTENDED FIELD TRIP APPLICATION

(To be completed by Teacher/Advisor)

School Stanwood High School Today's Date 1/3/2023  
Individuals/Group Involved Poultry Evaluation Team Number of Students 7  
Activity Poultry CDE  
Destination Kennewick  
Departure Date 3/10/2023 Return Date 3/11/2023  
Accommodations: Best Western Plus Kennewick Inn  
Source of Revenue: FFA ASB Account  
Fundraising Activities: FFA Cafe, Prime Rib Dinner  
Individual Student Cost: 0 Total Group Cost: 0

How was this activity/trip available to any interested and/or eligible student(s). This FFA activity is available to all FFA members who are interested. FFA membership is available to all students in agriculture classes.

How was this trip promoted to all interested/eligible students? Through FFA activities, FFA meetings, FFA calendar updates, this week in FFA flyers and promotion by all four agriculture teachers.

Will any student(s) be excluded from this trip due to the inability to pay? NO

Insurance (special coverages): N/A

Purpose of Trip (including educational value): Poultry Evaluation Team Training

Has this trip been previously taken? No - New Event

If yes, when?

**List of chaperones and students MUST be attached to this form.** (Chaperones must be of each gender if students of each gender attending.)

- \_\_\_\_\_ 1. Additional information needed: \_\_\_\_\_
- \_\_\_\_\_ 2. Insurance coverage to be arranged through the insurance office.
- \_\_\_\_\_ 3. Parent permission and medical authorization forms go to principal.
- \_\_\_\_\_ 4. All district employees need to submit travel request form.
- \_\_\_\_\_ 5. Notify school nurse.

\_\_\_\_\_  
Signature of Initiator

\_\_\_\_\_  
Signature of Building Principal

For Administration Use Only:

\_\_\_\_\_ Board Approval needed. Will be submitted on 2/21  
\_\_\_\_\_ Approved

\_\_\_\_\_  
Superintendent or Designee Signature

\_\_\_\_\_  
Date



**NON-LOCAL, OVERNIGHT & EXTENDED FIELD TRIP APPLICATION**  
**(To be completed by Teacher/Advisor)**

School Stanwood High School Today's Date 2/1/2023

Individuals/Group Involved FFA Ag Mech Number of Students 6

Activity Livestock Judging

Destination Moses Lake

Departure Date 3/23/2023 Return Date 3/25/2023

Accommodations: Wingate by Windham Moses Lake

Source of Revenue: CTE / ASB FFA Account

Fundraising Activities Prime Rib Dinner, FFA Cafe

Individual Student Cost 0 Total Group Cost \$65.00

How was this activity/trip available to any interested and/or eligible student(s) FFA activities, club meetings

How was this trip promoted to all interested/eligible students? In FFA activities, club meetings

Will any student(s) be excluded from this trip due to the inability to pay? NO

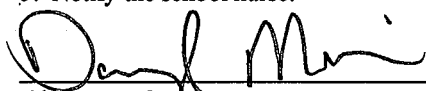
Insurance (special coverages) N/A


Purpose of Trip (include the educational value) Compete in tractor driving contest

Has this trip been previously taken? yes If yes, when? every year

**List of chaperones and students MUST be attached to this form.** (Chaperones must be of each gender if students of each gender are attending.)

1. Additional information needed: \_\_\_\_\_
2. Insurance coverage to be arranged through the insurance office.
3. Parent permission and medical authorization forms go to the principal.
4. All district employees need to submit a travel request form.
5. Notify the school nurse.

  
Signature of Initiator

  
Signature of Building Principal

For Administration Use Only:

Board approval needed. Will be submitted on 2/21  
Approved

Superintendent or Designee Signature

Date



### NON-LOCAL, OVERNIGHT & EXTENDED FIELD TRIP APPLICATION (To be completed by Teacher/Advisor)

School Stanwood High School Today's Date 2/1/2023

Individuals/Group Involved TSA Chapter Members Number of Students 23

Activity TSA State Conference

Destination SeaTac WA

Departure Date 3/22/2023 Return Date 3/25/2023

Accommodations: DoubleTree SeaTac

Source of Revenue: TSA ASB Account & CTE funds

Fundraising Activities Making of plaques

Individual Student Cost \$400 Total Group Cost \$9200

How was this activity/trip available to any interested and/or eligible student(s) Open to all TSA members that were interested in competing

How was this trip promoted to all interested/eligible students? Through Chapter Meetings and in class announcements

Will any student(s) be excluded from this trip due to the inability to pay? No

Insurance (special coverages) N/A

Purpose of Trip (include the educational value) For students to demonstrate and build their leadership, technical, and employability skills while meeting the CTE Extended Leadership requirements.

Has this trip been previously taken? Yes If yes, when? Yes, every year since 2003.

**List of chaperones and students MUST be attached to this form.** (Chaperones must be of each gender if students of each gender are attending.)

1. Additional information needed: \_\_\_\_\_
2. Insurance coverage to be arranged through the insurance office.
3. Parent permission and medical authorization forms go to the principal.
4. All district employees need to submit a travel request form.
5. Notify the school nurse.

Signature of Initiator

Signature of Building Principal

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Approved \_\_\_\_\_

Superintendent or Designee Signature \_\_\_\_\_ Date \_\_\_\_\_



### NON-LOCAL, OVERNIGHT & EXTENDED FIELD TRIP APPLICATION (To be completed by Teacher/Advisor)

School Stanwood High School Today's Date \_\_\_\_\_

Individuals/Group Involved Sports Medicine Number of Students \_\_\_\_\_

Activity WCTSMA STATE

Destination SPOKANE

Departure Date 4/27/2023 Return Date 4/29/2023

Accommodations: DoubleTree by Hilton

Source of Revenue: CTE & Booster Club

Fundraising Activities Physical night

Individual Student Cost \$60.00 Total Group Cost \$6500.00

How was this activity/trip available to any interested and/or eligible student(s) through class & club

How was this trip promoted to all interested/eligible students? through class & club

Will any student(s) be excluded from this trip due to the inability to pay? ND

Insurance (special coverages) N/A

Purpose of Trip (include the educational value) compete at the State Sports Medicine Competition

Has this trip been previously taken? yes If yes, when? since 1995 every year

**List of chaperones and students MUST be attached to this form.** (Chaperones must be of each gender if students of each gender are attending.)

1. Additional information needed: \_\_\_\_\_
2. Insurance coverage to be arranged through the insurance office.
3. Parent permission and medical authorization forms go to the principal.
4. All district employees need to submit a travel request form.
5. Notify the school nurse.

Mark Brewer  
Signature of Initiator

[Signature]  
Signature of Building Principal

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Superintendent or Designee Signature \_\_\_\_\_ Date \_\_\_\_\_



### NON-LOCAL, OVERNIGHT & EXTENDED FIELD TRIP APPLICATION (To be completed by Teacher/Advisor)

School Elger Bay Elementary Today's Date 1/30/23

Individuals/Group Involved EBE Number of Students 61

Activity Fifth grade camp

Destination 484 Camp Orkilla rd, Eastsound, WA, 98245

Departure Date June 5<sup>th</sup> 2023 Return Date June 7<sup>th</sup> 2023

Accommodations: Cabins

Source of Revenue: PTA

Fundraising Activities Krispy Kreme Fundraiser

Individual Student Cost 135 roughly Total Group Cost 8,185.00

How was this activity/trip available to any interested and/or eligible student(s) \_\_\_\_\_

How was this trip promoted to all interested/eligible students? Grade level Teacher / Admin

Will any student(s) be excluded from this trip due to the inability to pay? NO

Insurance (special coverages) \_\_\_\_\_

Purpose of Trip (include the educational value) Fifth grade camp

Has this trip been previously taken? Yes If yes, when? 2019

**List of chaperones and students MUST be attached to this form.** (Chaperones must be of each gender if students of each gender are attending.)

1. Additional information needed: \_\_\_\_\_
2. Insurance coverage to be arranged through the insurance office.
3. Parent permission and medical authorization forms go to the principal.
4. All district employees need to submit a travel request form.
5. Notify the school nurse.

[Signature]  
Signature of Initiator

[Signature]  
Signature of Building Principal

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Approved \_\_\_\_\_

\_\_\_\_\_  
Superintendent or Designee Signature Date



### NON-LOCAL, OVERNIGHT & EXTENDED FIELD TRIP APPLICATION (To be completed by Teacher/Advisor)

School Cedarhome Today's Date Feb 7, 2023

Individuals/Group Involved 5th grade Number of Students 96

Activity YMCA Outdoor Education

Destination CAMP ORKILA (YMCA) Orcas Island

Departure Date 6/7/23 Return Date 6/9/23

Accommodations: Cabins

Source of Revenue: Fundraising, Parent Payment

Fundraising Activities Double good popcorn, Jog-a-thon

Individual Student Cost \$225 Total Group Cost \$27,000

How was this activity/trip available to any interested and/or eligible student(s) Offered to all 5th grade

How was this trip promoted to all interested/eligible students? 5th grade teachers have shared

Will any student(s) be excluded from this trip due to the inability to pay? No. Fundraising information + donations available.

Insurance (special coverages) Included in camp cost

Purpose of Trip (include the educational value) Outdoor Education, science standards, team building

Has this trip been previously taken? yes If yes, when? Past 20 years with the exception of last 3 (Covid)

List of chaperones and students MUST be attached to this form. (Chaperones must be of each gender if students of each gender are attending.)

1. Additional information needed: \_\_\_\_\_
2. Insurance coverage to be arranged through the insurance office.
3. Parent permission and medical authorization forms go to the principal.
4. All district employees need to submit a travel request form.
5. Notify the school nurse.

Albee Shukuma  
Signature of Initiator

[Signature]  
Signature of Building Principal

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Date



**NON-LOCAL, OVERNIGHT & EXTENDED FIELD TRIP APPLICATION**  
**(To be completed by Teacher/Advisor)**

School Twin City Elementary Today's Date 2/13/23

Individuals/Group Involved Fifth Grade Number of Students 60

Activity Camp Scymour Outdoor Education

Destination Gig Harbor WA

Departure Date 5/1/23 Return Date 5/3/23

Accommodations: Camp Scymour cabins

Source of Revenue: Student funds, Grant, PTA

Fundraising Activities PTA activities

Individual Student Cost \$150 Total Group Cost 18,320-

How was this activity/trip available to any interested and/or eligible student(s) fifth grade only

How was this trip promoted to all interested/eligible students? Newsletter, Flyer, Email

Will any student(s) be excluded from this trip due to the inability to pay? NO

Insurance (special coverages) SCSD

Purpose of Trip (include the educational value) outdoor education aligned to fifth grade NGSS science standards

Has this trip been previously taken? yes If yes, when? annually

**List of chaperones and students MUST be attached to this form.** (Chaperones must be of each gender if students of each gender are attending.)

1. Additional information needed: \_\_\_\_\_
2. Insurance coverage to be arranged through the insurance office.
3. Parent permission and medical authorization forms go to the principal.
4. All district employees need to submit a travel request form.
5. Notify the school nurse.

Jenif A  
Signature of Initiator

Jenif A  
Signature of Building Principal

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Approved

Superintendent or Designee Signature \_\_\_\_\_ Date \_\_\_\_\_