

LYON COUNTY SCHOOL DISTRICT
TRAVEL REQUEST

NOTE: See LCSD Board Policy GBCF: Work-Related Travel for all requirements.

Name(s) of Attendees Jamie DeChambeau and 2 other TBD, and 18 senior students

SCHOOL Smith Valley School

NAME OF CONFERENCE: Senior Class Trip - Lake Tahoe, Dixie dinner cruise
(Do Not Use Acronyms)

(ATTACH conference program information and provide website address)

CITY/STATE OF CONFERENCE: Lake Tahoe

DATE OF DEPARTURE: 6/3/25

DATE OF RETURN: 6/3/25

Training/Travel/Conference is (check all that apply): Mandated by the state ☐ Mandated by the district ☐
Needed for certification/licensing ☐ Related to the District Performance Plan ☐ Related to our School ☐
Performance Plan ☐ Related to a specific program/course ☒ Other ☒

Provide a detailed description below of the focus of the conference, and how attending will have a positive impact on climate, culture, and student learning.

The class of 2025 raised money during the last 4 years. The class has chosen to use part of the money to take a trip for the evening to Lake Tahoe and have dinner on the Dixie II. The senior class has worked hard to raise the necessary funds and would like to celebrate their last weeks together on this dinner cruise. The senior class advisors and 2 other approved district employees will chaperone.

TRAVEL APPROVED: Date 4/9/25

Duane Mattice

Site administrator or supervisor signature

TRAVEL APPROVED: Date 4/17/25

Sandra Huckaby
Superintendent or designee signature

District Office Use Only

Received by District Office

Date: 4/9/25

Board Approved: Yes () No ()

Date: _____

Please ensure that you read and comply with Lyon County School District Policy GBCF: Work-Related Travel when completing this form and submitting for reimbursable items. Properly mark the funding source of the travel.

ESTIMATED EXPENSES

If funded by a grant or other, specify grant/other name here: Senior class funds

						<i>District Office</i>	<i>Grant</i>	<i>School Site</i>	<i>Other</i>
BUDGET#	<u>NA</u>								
Registration Fees:	Attendees	X	Reg. fee	\$	<u>0</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BUDGET#	<u>District Yukons</u>								
Travel By:					\$	<u>0</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(Air, district car, private car for personal convenience, etc.)									
BUDGET#	<u>NA</u>								
Lodging:	Room rate	\$	<input type="checkbox"/>	X	<input type="checkbox"/>	nights	\$	<input type="checkbox"/>	<input type="checkbox"/>
(Use GSA ratings for lodging and meals www.gsa.gov ATTENDEE WILL OWE DIFFERENCE if applicable) <u>lodging receipts must be obtained and sent to District Office upon return.</u>									
Meals:	Breakfast	\$	<input type="checkbox"/>	X	<input type="checkbox"/>	days	\$	<input type="checkbox"/>	<input type="checkbox"/>
	Lunch	\$	<input type="checkbox"/>	X	<input type="checkbox"/>	days	\$	<input type="checkbox"/>	<input type="checkbox"/>
	Dinner	\$	<input type="checkbox"/>	X	<input type="checkbox"/>	days	\$	<input type="checkbox"/>	<input type="checkbox"/>
	Incidental	\$	<input type="checkbox"/>	X	<input type="checkbox"/>	days	\$	<input type="checkbox"/>	<input type="checkbox"/>
Substitutes:	# of Days	<input type="checkbox"/>	X	\$	<input type="checkbox"/>	/day		<input type="checkbox"/>	<input type="checkbox"/>
Other transportation fees: (i.e. car rental, taxi, shuttle, parking, mileage to/from airport, etc.)				\$	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
				\$	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Other Miscellaneous expenses: (attach explanation)				\$	<u>0</u>				
TOTAL EXPENSES									

****FAILURE TO COMPLETE ANY PART OF THIS FORM WILL RESULT IN THE FORM BEING RETURNED AND/OR TRAVEL DENIED.**

Conference Information

Conference Dates & Times:	NA
Name of where conference/training is being held (i.e. Hotel, School, College, Convention Center):	NA

Airline Information

Note: Conference registration and travel arrangements will only be made after school board approval. Only airfare, lodging, and conference registration are eligible for payment prior to traveling. All other expenses will be reimbursed after travel per LCSD Policy GBCF: Work-Related Travel.

Attach your preferred and most economical flight schedule (i.e. Southwest, Delta, United, etc.)

Date & Time you wish to DEPART:	NA
Date & Time you wish to RETURN:	NA
List any special notes here:	NA

Are you renting a car? ☐ Yes ☐ No How many days?

Note: Car insurance should be declined as the district insurance provides adequate coverage.

Lodging Information

Note: Lodging must be made by Attendee or Site for purchase order payments only. No district office credit card charges.

Lodging GSA (Per Diem Rate) : _____	All travelers agree to share lodging as appropriate? <input type="checkbox"/> Yes <input type="checkbox"/> No
Register under what name(s)?	NA
Name, Address, Phone number of lodging establishment:	NA

DEADLINE DATE :	Code Information:
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NOTE: Please furnish a copy of any information you have on the conference, workshop, training, etc. **Please email travel request with SIGNATURES to Superintendent's office for approval.**

Lyon County School District
Field/Co-Curricular Trip Application

Date 4/8/25 Overnight Co-Curricular/Athletic Trip Application

Please complete this form and submit to Principal at least ten (10) working days prior to the planned trip. If more than one class is going, only one form has to be submitted. **If trip is for overnight Athletic/Co-Curricular, form must be submitted at least three (3) full weeks prior to the planned trip and second page must also be completed and submitted with application.** Please see LCSD Policy IGD, IGDF and IGDG and the LCSD Field Trip Handbook for additional information.

Upon Principal's approval, a copy will be sent to the Deputy Superintendent's office and Field Trip Coordinator.

Notification of the field trip must be sent to the parents for their approval. Teachers are responsible for collecting signed parental permission slips up to the day of the trip and then turn them into the office. In the event a student has forgotten his/her permission slip, there will be **no phone calls for verbal permission allowed**.

Please submit to the office a list of students who will be participating the day prior to the trip. The day of the trip, take roll and notify the office which students are absent or staying behind. Also submit to the bus driver, a complete list of all persons riding the bus.

Emergency Data – It is the teacher's responsibility to see that the student emergency data be taken on all field trips and that all **Trip Rosters** are completely filled out.

School SVS Teacher(s) Jamie DeChambeck ^{Senior class advisor} Grade(s) 12 Date of Trip 4/3/25
Destination (Please complete attached itinerary) Lake Tahoe, M.S. Dixie II

Vehicle Type:	Bus	Wheelchair needed	District Car/Van
Number of Buses Requested:			
Bus Driver Required:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> <u>3 Yukons</u>

Driver is DMV cleared for white fleet ☒

Brief description of the field trip and destination address:

The Smith Valley Class of 2025 has raised funds for a class trip. The class would like to take the M.S. Dixie II Sunset Dinner Cruise on Lake Tahoe, and return to Smith Valley after.

Educational justification:

Cruise loads at 5:00pm - Cruise ends 9:30pm

Number of Students: 18 (One adult person per 10 students) Number of chaperones: 3

Load time from school: <u>2:00pm</u>	Arrival time at destination: <u>4:30pm</u>
Departure time from school: <u>2:30pm</u>	Departure time from destination: <u>9:30pm</u>
	Approximate return time at school: <u>11:00pm</u>

2024/2025 school year **Per Mile Cost \$3.60 **** **Per Hour Cost \$30.50 ****

Please check one of the boxes: ☒ Field Trip (Please provide Budget Code)
☐ Co-Curricular Trip ☐ Overnight Co-Curricular/Athletic

School Budget Code: student body funds - class of 2025

Approved: _____

Principal

Received by District: _____

(Please refer to LCSD Field Trip Handbook for questions on trip identity)

revised 11/14/2024

** subject to change