

**AMPHITHEATER PUBLIC SCHOOLS  
STAFF/STUDENT TRAVEL REQUEST**

*Attach supporting documentation as needed*

**ORIGINAL SUBMISSION**

**THIS FORM SHOULD BE USED FOR ALL TRAVEL EXCEPT THAT TRAVEL WITHIN PIMA  
COUNTY OR A.I.A. SANCTIONED EVENT TRAVEL**

SCHOOL: IRHS

ESTIMATED NUMBER OF STUDENTS: 15

NAME OF SCHOOL GROUP/CLUB/ENTITY: Women's Volleyball Varsity Team

STAFF ADVISOR(S)/CHAPERONES: Bill Lang (Head Coach), Tim Gallagher, Kathy Franklin,  
Kristin Reece, Kelsey Groff, Dee Dinota, Aaron Marter

ABSENCE: # Days 2 Sub Required: ☒ Yes ☐ No # of School Days Missed 2

ACTIVITY / EVENT / PURPOSE OF TRAVEL: 2013 San Diego Fall Classic VB Invitational

DESTINATION OF TRAVEL: San Diego, CA

DATES OF TRAVEL: 9/05/2013 – 9/08/2013

ACADEMIC BENEFITS TO STUDENTS: This trip is an athletic competition for the Varsity Volleyball team. Athletic activities such as this support the academic mission of the school, where studies show that student-athletes involved in such events tend to have a higher grade-point average, lower dropout rate, and fewer discipline problems than traditional students.

PROPOSED METHOD OF TRANSPORTATION:

☒ District-owned vehicles

Transportation approval: \_\_\_\_\_

☐ Other \_\_\_\_\_

Are expenses paid from any of the following accounts? Auxiliary \_\_\_\_\_ Tax Credits YES Club Funds YES  
Parent Organization \_\_\_\_\_

**EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)**

	APPROX. COST	BUDGET CODE
Registration	<u>375.00</u>	<u>526/850-00-100-3400-280-6892</u>
Transportation	<u>2,250.00</u>	<u>526/850-00-100-3400-280-6515</u>
Meals	<u>2,050.00</u>	<u>526/850-00-100-3400-280-6892</u>
Lodging	<u>2,855.00</u>	<u>526/850-00-100-3400-280-6892</u>

Substitutes 200.00

530-00-100-3400-280-6113

TOTAL 7,700.00

WILL THE DISTRICT RECEIVE REIMBURSEMENT? No  
IF SO, SOURCE & AMOUNTS: \_\_\_\_\_

HOW ARE CHAPERONE EXPENSES PAID? In budget; Club Funds

COST TO EACH STUDENT \$ 0.00

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? All team members share fundraising responsibilities.

FUNDING SOURCE(S): Volleyball tax credit monies and club funds.

FUNDRAISING ACTIVITIES PLANNED (If applicable):  
\_\_\_\_\_

SUBMITTED BY: \_\_\_\_\_

Signature

8/12/2013  
Date

APPROVED BY: \_\_\_\_\_

Principal/Supervisor

8/12/13  
Date

Associate Superintendent/Superintendent

8/13/13  
Date

AMPHITHEATER PUBLIC SCHOOLS  
STAFF/STUDENT TRAVEL REQUEST

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**ORIGINAL SUBMISSION**

**THIS FORM SHOULD BE USED FOR ALL TRAVEL EXCEPT THAT TRAVEL WITHIN PIMA COUNTY OR A.I.A. SANCTIONED EVENT TRAVEL**

SCHOOL: AMS

ESTIMATED NUMBER OF STUDENTS: 3

NAME OF SCHOOL GROUP/CLUB/ENTITY: Girl's Sports Conditioning Class

STAFF ADVISOR(S)/CHAPERONES: Tanya Wall

ABSENCE: # Days 3 during fall break Sub Required: ☐ Yes ☒ No # of School Days Missed 0

ACTIVITY / EVENT / PURPOSE OF TRAVEL: Students will represent AMS in a performance at the Pilates Youth Performance at the Pilates Method Alliance (PMA) international conference.

DESTINATION OF TRAVEL: Fort Lauderdale, Florida

DATES OF TRAVEL: Wednesday, October 9th - Friday, October 11th 2013

ACADEMIC BENEFITS TO STUDENTS: These students have been participating in the Sports Conditioning Class at AMS with Lisa Powell. One day a week BodyWorks Pilates comes in and works with Lisa Powell to teach Pilates to the girls. Our students partnered with other middle school students and performed at the Pilates Convention that took place in Tucson in May of 2013. This group was invited to Ft. Lauderdale to perform. They are learning the benefits of being physically healthy and the impact of programs such as Pilates on adolescents. It provides them the long term health benefits that our PE and Health Curriculum teach.

PROPOSED METHOD OF TRANSPORTATION:

☐ District-owned vehicles

Transportation approval: \_\_\_\_\_

☒ Other By air

Are expenses paid from any of the following accounts? Auxiliary \_\_\_\_\_ Tax Credits \_\_\_\_\_ Club Funds \_\_\_\_\_  
Parent Organization \_\_\_\_\_

**EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)**

	APPROX. COST	BUDGET CODE
Registration	_____	_____
Transportation	_____	_____
Meals	_____	_____

Lodging	_____	_____
Substitutes	_____	_____
TOTAL	<u>0</u>	

WILL THE DISTRICT RECEIVE REIMBURSEMENT? N/A  
IF SO, SOURCE & AMOUNTS: \_\_\_\_\_

HOW ARE CHAPERONE EXPENSES PAID? N/A

COST TO EACH STUDENT \$ N/A

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? Pilates and GRIN (non-profit) will be raising funds to pay for students and chaperone to travel by air, as well as room and board.

FUNDING SOURCE(S): GRIN (Grand-Parents in Residence) and BodyWorks Pilates studio.

FUNDRAISING ACTIVITIES PLANNED (If applicable):  
\_\_\_\_\_

SUBMITTED BY: \_\_\_\_\_

Signature

8/7/13  
Date

APPROVED BY: \_\_\_\_\_

Principal/Supervisor

8/7/13  
Date

Associate Superintendent/Superintendent

8/18/13  
Date

**AMPHITHEATER PUBLIC SCHOOLS  
STAFF/STUDENT TRAVEL REQUEST**

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**ORIGINAL SUBMISSION**

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SCHOOL: CDO

ESTIMATED NUMBER OF STUDENTS: 20

NAME OF SCHOOL GROUP/CLUB/ENTITY: Academic Decathlon

STAFF ADVISOR(S)/CHAPERONES: Chris and Elethia Yetman

ABSENCE: # Days 4 Sub Required: ☒ Yes ☐ No # of School Days Missed 2

ACTIVITY / EVENT / PURPOSE OF TRAVEL: Academic Decathlon Competition

DESTINATION OF TRAVEL: Dallas, TX

DATES OF TRAVEL: October 24 - 27, 2013

ACADEMIC BENEFITS TO STUDENTS: Academic Competition, School exchange, Study skills development, etc.

PROPOSED METHOD OF TRANSPORTATION:

☐ District-owned vehicles

Transportation approval: N/A

☒ Other Air Travel

Are expenses paid from any of the following accounts? Auxiliary \_\_\_\_\_ Tax Credits XX Club Funds XX  
Parent Organization \_\_\_\_\_

**EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)**

	APPROX. COST	BUDGET CODE
Registration	<u>\$0</u>	_____
Transportation	<u>\$8,800</u>	<u>850/526-00-100-3400-282-6515</u>
Meals	<u>\$500</u>	<u>850/526-00-100-3400-282-6892</u>
Lodging	<u>\$500</u>	<u>850/526-00-100-3400-282-6892</u>
Substitutes	<u>\$400</u>	<u>850/526-00-100-3400-282-6113</u>
TOTAL	<u>\$10,200</u>	

WILL THE DISTRICT RECEIVE REIMBURSEMENT? **NO**  
IF SO, SOURCE & AMOUNTS: \_\_\_\_\_

HOW ARE CHAPERONE EXPENSES PAID? **Tax Credit**

COST TO EACH STUDENT \$ **\$500**

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? **Tax Credit Funds**

FUNDING SOURCE(S): **Tax Credit Funds**


FUNDRAISING ACTIVITIES PLANNED (If applicable):  
**None**

SUBMITTED BY:   
Signature

**08/14/13**  
Date

APPROVED BY:   
Principal/Supervisor

**8/15/13**  
Date

  
Associate Superintendent/Superintendent

**8/21/13**  
Date

**AMPHITHEATER PUBLIC SCHOOLS  
STAFF/STUDENT TRAVEL REQUEST**

*Attach supporting documentation as needed*

**ORIGINAL SUBMISSION**

**THIS FORM SHOULD BE USED FOR ALL TRAVEL EXCEPT THAT TRAVEL WITHIN PIMA  
COUNTY OR A.I.A. SANCTIONED EVENT TRAVEL**

SCHOOL: **IRHS**

ESTIMATED NUMBER OF STUDENTS: 70

NAME OF SCHOOL GROUP/CLUB/ENTITY: **Ironwood Ridge Marching Band**

STAFF ADVISOR(S)/CHAPERONES: **Mark and Rachelle Hodge, Glen and Gloria Singleton, Tina Gillette,  
Ms. Yersavich, Ms Delgado, Tran Tai, Jason Bartel, Katherine Spencer**

ABSENCE: # Days 6 Sub Required: ☐ Yes ☒ No # of School Days Missed 0

ACTIVITY / EVENT / PURPOSE OF TRAVEL: **To attend the Holiday Bowl Parade and play in the  
Halftime Show at the Holiday Bowl**

DESTINATION OF TRAVEL: **San Diego, CA**

DATES OF TRAVEL: **December 26-31, 2013**

ACADEMIC BENEFITS TO STUDENTS: **Students will be adjudicated and critiqued on their  
performance of a field show. The students will be given specific instructions on how to improve  
their show. As an added benefit, the students will perform a halftime show with over 1000 band  
students from around the country.**

PROPOSED METHOD OF TRANSPORTATION:

☐ District-owned vehicles

Transportation approval: \_\_\_\_\_

☒ Other **Charter Buses**

Are expenses paid from any of the following accounts? Auxiliary \_\_\_\_\_ Tax Credits ☒ Club Funds ☒

Parent Organization \_\_\_\_\_

**EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)**

	APPROX. COST	BUDGET CODE
Registration	<b><u>\$48,917.50</u></b>	<b><u>526/850-00-100-3400-280-6892</u></b>
Transportation	<b><u>\$7,749.45</u></b>	<b><u>526/850-00-100-3400-280-6519</u></b>
Meals	<b><u>\$6,800.00</u></b>	<b><u>526/850-00-100-3400-280-6892</u></b>
Lodging	_____	<b><u>Included in Registration Fee</u></b>

Substitutes 0

TOTAL 63,466.95

WILL THE DISTRICT RECEIVE REIMBURSEMENT? Yes  
IF SO, SOURCE & AMOUNTS: Band Account, Tax Credit Account

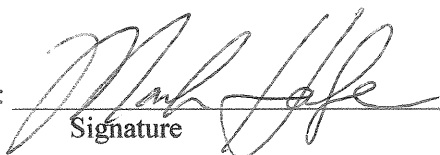
HOW ARE CHAPERONE EXPENSES PAID? Chaperones will pay thier own way.


COST TO EACH STUDENT \$ 746.67

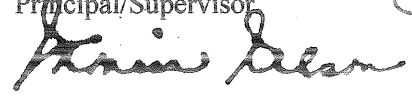
HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? Fundraisers will be held once a month until December to help defray the cost for students from low income families.

FUNDING SOURCE(S): Band Club Account, Tax Credit

FUNDRAISING ACTIVITIES PLANNED (If applicable):  
Coupon Fundraiser, Friday Night Blitz, Marching Invitational and Bake Sales.

SUBMITTED BY:  8-15-13  
Signature Date

APPROVED BY:  8-15-13  
Principal/Supervisor Date

 8/19/13  
Associate Superintendent/Superintendent Date



AMPHITHEATER PUBLIC SCHOOLS  
STAFF TRAVEL/CONFERENCE REQUEST

**THIS FORM SHOULD BE USED FOR ALL TRAVEL EXCEPT THAT TRAVEL WITHIN PIMA COUNTY OR A.I.A. SANCTIONED EVENT TRAVEL.**

EMPLOYEE(S): Anthony Young

SCHOOL: Facilities

Department (opt.): Energy Management

DATE(S): Sept 17 - Sept 18, 2013

ACTIVITY/EVENT: EnergySmart 2013 Conference

LOCATION: Nashville, Tn

ABSENCE: # Days 2 Sub Required: ☐ Yes ☐ No # of School Days Missed \_\_\_\_\_

EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

<u>APPROXIMATE COST</u>		<u>BUDGET CODE/DESCRIPTION</u>
		(Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>100.00</u>	<u>001 00 100 2579 527 6360</u>
Transportation	<u>500.00</u> Mode <u>Airline</u>	<u>001 00 100 2579 527 6582</u>
Rental Car	_____	_____
Meals	<u>88.00</u>	<u>001 00 100 2579 527 6582</u>
Lodging	<u>289.00</u>	<u>001 00 100 2579 527 6582</u>
Substitutes	_____	_____
TOTAL	<u>977.00</u>	

The District will ☐ (or) will not ☒ receive reimbursement from outside sources.

Purpose of travel: Continuing Education

Outcomes and academic benefits to students and staff: Energy efficiency and savings

Submitted by: \_\_\_\_\_

Signature

8-2-13

Date

Principal/Supervisor

8-13-13

Date

Associate Superintendent/Superintendent

8/14/13

Date

AMPHITHEATER PUBLIC SCHOOLS  
STAFF TRAVEL/CONFERENCE REQUEST

**THIS FORM SHOULD BE USED FOR ALL TRAVEL EXCEPT THAT TRAVEL WITHIN PIMA COUNTY OR A.I.A. SANCTIONED EVENT TRAVEL.**

EMPLOYEE(S): Michael McConnell \_\_\_\_\_

SCHOOL: Walker

Department (opt.): \_\_\_\_\_

DATE(S): Sept. 17-20, 2013 and May 6-9, 2014

ACTIVITY/EVENT: AVID ADL Training

LOCATION: San Diego CA

ABSENCE: # Days 4 Sub Required: ☒ Yes ☐ No # of School Days Missed 4

EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

<u>APPROXIMATE COST</u>		<u>BUDGET CODE/DESCRIPTION</u>
		(Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>0.00</u>	_____
Transportation	<u>\$1,100.00</u> Mode _____	<u>140-14-100-2210-510-6582</u>
Rental Car	<u>0.00</u> _____	
Meals	<u>\$354.00</u>	<u>140-14-100-2210-510-6582</u>
Lodging	<u>\$972.00</u>	<u>140-14-100-2210-510-6582</u>
Substitutes	<u>0.00</u> _____	
TOTAL	<u>\$2,426.00</u>	

The District will ☐ (or) will not ☒ receive reimbursement from outside sources.

Purpose of travel: As the Amphitheater AVID Elementary Liaison these are sessions 3 and 4 of four. The AVID ADL supports the AVID Elementary sites through implementation of the AVID Elementary Plan as well as supporting and training teachers.

Outcomes and academic benefits to students and staff: AVID is a college readiness curriculum that is being used at AMS, La Cima, and AHS as feeder elementary sites we are preparing students for the rigors of the program.

Submitted by: \_\_\_\_\_

Signature

Date

Principal/Supervisor

Date

Associate Superintendent/Supintendent

Date

AMPHITHEATER PUBLIC SCHOOLS  
STAFF TRAVEL/CONFERENCE REQUEST

**THIS FORM SHOULD BE USED FOR ALL TRAVEL EXCEPT THAT TRAVEL WITHIN PIMA COUNTY OR A.I.A. SANCTIONED EVENT TRAVEL.**

EMPLOYEE(S): Robert Stoner Pat Corcoran

Vanessa Stinson \_\_\_\_\_

SCHOOL: Keeling

Department (opt.): \_\_\_\_\_

DATE(S): October 7-9, 2013

ACTIVITY/EVENT: No Excuses University Conference

LOCATION: San Antonio, TX

ABSENCE: # Days 3 Sub Required: ☒ Yes ☐ No

# of School Days Missed 3

EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

<u>APPROXIMATE COST</u>		<u>BUDGET CODE/DESCRIPTION</u>
Registration	<u>1275.00</u>	<u>100 14 100 2210 109 6360</u>
Transportation	<u>1224.00</u>	Mode <u>Airplane</u> <u>100 14 100 2210 109 6582</u>
Rental Car	<u>100.00</u>	<u>100 14 100 2210 109 6582</u>
Meals	<u>531.00</u>	<u>100 14 100 2210 109 6582</u>
Lodging	<u>1300.00</u>	<u>100 14 100 2210 109 6582</u>
Substitutes	<u>600.00</u>	<u>100 14 100 2210 109 6113</u>
TOTAL	<u>\$5030.00</u>	

The District will ☐ (or) will not ☒ receive reimbursement from outside sources.

Purpose of travel: Professional Development

Outcomes and academic benefits to students and staff: Presenters will be sharing key factors for working with students in high poverty areas which result in exceptional academic gains. Keeling staff will present information from the conference to all Keeling faculty throughout the 13-14 school year focusing on effective implementation of the six exceptional systems used to produce these academic results.

Submitted by: \_\_\_\_\_

Signature

8/12/13  
Date

\_\_\_\_\_  
Principal/Supervisor

8/13/13  
Date

\_\_\_\_\_  
Associate Superintendent/Supintendent

8/24/13  
Date