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

SCHO	OL: <u>IRHS</u>		``		
ESTIN	ESTIMATED NUMBER OF STUDENTS: 30				
NAMI	NAME OF SCHOOL GROUP/CLUB/ENTITY: Cross Country				
STAFI	F ADVISOR(S)/CI	HAPERONES: Stacey Wilson, C	athy Harris, Andy Roof		
ABSE	NCE: # Days <u>3</u>	Sub Required: X Yes No	# of School Days Missed 1		
ACTIV	/ITY / EVENT / P	URPOSE OF TRAVEL: Mt Carme	el Cross Country Meet		
DESTI	NATION OF TRA	AVEL: San Diego, CA			
ACAD	S OF TRAVEL: <u>9</u> , EMIC BENEFITS of the best athle		ill have the opportunity to compete against		
Dis Transp	OSED METHOD (strict-owned vehicl ortation approval: er <u>Tour Bus</u>				
Are expenses paid from any of the following accounts? Auxiliary Tax Credits X Club Funds X Parent Organization					
EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)					
	APPROX. COST BUDGET CODE				
	Registration	<u>\$275.00</u>	<u>526/850-00-100-1001-280-6892</u>		
	Transportation	<u>\$3,400.00</u>	<u>526/850-00-100-1001-280-6519</u>		
	Meals	<u>\$2,300.00</u>	<u>526/850-00-100-1001-280-6892</u>		
	Lodging	<u>\$2,700.00</u>	526/850-QQ-100-1001-280-6892		
	Substitutes	<u>\$217.00</u>	<u>530-00-100-3400-280-6113</u>		
	TOTAL	\$8,992.00			

WILL THE DISTRICT RECEIVE REIMBURSEMENT? N/A IF SO, SOURCE & AMOUNTS:	
HOW ARE CHAPERONE EXPENSES PAID? Yes	
COST TO EACH STUDENT \$ 210.00	
HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUIPROVISIONS)? Tax credit	DENTS (LOW FAMILY INCOME
FUNDING SOURCE(S): Club, Tax Credit and parents	
FUNDRAISING ACTIVITIES PLANNED (If applicable): None	
SUBMITTED BY: Stacey Wilson	7/27/15
	7/21/15 Date 7/21/1
Principal/Supervisor	Date
Nomen Lelson	8/3/15
Associate Superintendent/Superintendent	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: IRHS					
ESTIMA	ESTIMATED NUMBER OF STUDENTS: 14-18				
NAME C	OF SCHOOL GROU	JP/CLUB/ENTITY: IRHS Wrestling Te	eam_		
STAFF A	ADVISOR(S)/CHAI	PERONES: Tim Berrier, Paul Vasque	<u>z</u>		
ABSENC	CE: # Days2	Sub Required: Yes No	# of School Days Missed1_		
ACTIVIT	ΓY / EVENT / PUR	POSE OF TRAVEL: Las Cruces Invita	tional		
DESTINA	ATION OF TRAVE	EL: Las Cruces, New Mexico			
DATES OF TRAVEL: <u>Dec 11-12, 2015</u> ACADEMIC BENEFITS TO STUDENTS: <u>We currently have 7 wrestlers in college who benefitted</u> from these types of tournaments by receiving financial aid. This is the type of tournament that college coaches pay attention to and attend. The students will be able to compete against other students from the southwest US.					
Distr.	ED METHOD OF rict-owned vehicles tation approval: Van rental.	ΓRANSPORTATION:			
Are expenses paid from any of the following accounts? Auxiliary Tax Creditsx Club Fundsx Parent Organizationx					
EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)					
		APPROX. COST	BUDGET CODE		
R	egistration	<u>\$350</u>	526/850-00-100-1001-280-6892		
T	ransportation	<u>\$900</u>	526/850-00-100-1001-280-6519		
M	leals	0			
L	ođging	\$400	526/850-00-100-1001-280-6892		

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<u>\$100</u>

530-00-100-3400-280-6113

TOTAL

\$1,750

WILL THE DISTRICT RECEIVE REIMBURSEMENT? ____no__

IF SO, SOURCE & AMOUNTS:	
HOW ARE CHAPERONE EXPENSES PAID? Included in student cobe self paid.	osts, except for food, which will
COST TO EACH STUDENT \$ \$50-75	
HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUPENOVISIONS)? Club funds, tax credit and parent booster club food. Parent booster club is willing to pay for any student who ne	will pay for the trip, except for
FUNDING SOURCE(S): Tax credit, student club, booster club	-
FUNDRAISING ACTIVITIES PLANNED (If applicable): Golf tournament, silent auction and dinner-pending approval.	<u> </u>
SUBMITTED BY: Signature	7/19/15 Date
APPROVED BY: Natalie aBurue H Principal/Supervisor	7/2/15 Date
Marie Relaction Associate Superintendent	8/3/15 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: <u>IRHS</u>				
ESTIMATED NUMBER OF STUDENTS: 14-18				
NAME OF SCHOOL GR	OUP/CLUB/ENTITY: IRHS	Wrestling Team		
STAFF ADVISOR(S)/CH	IAPERONES: <u>Tim Berrier, F</u>	Paul Vasquez		
ABSENCE: # Days 4	Sub Required: Yes	No # of School Days Missed 0		
ACTIVITY / EVENT / PU	JRPOSE OF TRAVEL: Reno	Tournament of C:hampions		
DESTINATION OF TRA	VEL: Reno, Nevada			
DATES OF TRAVEL: Dec 17-20, 2015 ACADEMIC BENEFITS TO STUDENTS: We currently have 7 wrestlers in college who benefitted from these types of tournaments by receiving financial aid. This is the type of tournament that college coaches pay attention to and attend. There is also a college tournament here so many college coaches are already in attendance.				
PROPOSED METHOD OF TRANSPORTATION: District-owned vehicles Transportation approval: Other <u>Airlines; Tournament shuttle</u>				
Are expenses paid from an Parent Organizationx		Auxiliary Tax Credits <u>x</u> Club Funds <u>x</u>	_	
EXPENSES RE	QUESTED: (OBTAIN REC	CEIPTS FOR ALL INCURRED EXPENSES)		
	APPROX. COST	BUDGET CODE		
Registration	<u>\$600</u>	<u>526/850-00-100-1001-280-6892</u>		
Transportation	<u>\$6,000</u>	<u>526/850-00-100-1001-280-6519</u>		
Meals	<u>0</u>			
Lodging _	<u>\$1,000</u>	<u>526/850-00-100-1001-280-6892</u>		
Substitutes	0			

WILL THE DISTRICT RECEIVE REIMBURSEMENT? no IF SO, SOURCE & AMOUNTS:	
HOW ARE CHAPERONE EXPENSES PAID? <u>Included in student co</u>	sts, except for food, which will
COST TO EACH STUDENT \$ \$75-100	
HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUPROVISIONS)? Club funds, tax credit and parent booster club value food. Parent booster club is willing to pay for any student who need	vill pay for the trip, except for
FUNDING SOURCE(S): Tax credit, student club, booster club	
FUNDRAISING ACTIVITIES PLANNED (If applicable): Golf tournament, silent auction and dinner-pending approval.	-
SUBMITTED BY: Signature	7/19/15 Date 7/21/17
APPROVED BY: Natalia Buruett Principal/Supervisor	$\frac{7/2}{1}$
Marin Julan Associate Superintendent/Superintendent	8)3/15 Data
Associate Superintendent/Superintendent	Dalo

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):	<u>Mike Bejarano</u>	Mike Bejarano Roseanne Lopez SCHOOL: District Offices	
			Department (opt.): School Operations
			DATE(S): Sept. 30-Oct. 2, 2015
ACTIVITY/EVENT	: <u>EdLeader21 - 5th</u>	Annual Conference	
LOCATION: <u>Da</u>	llas, TX		
ABSENCE: # Days 3 Sub Required: \(\subseteq Yes \) Mo # of School Days Missed 3			
EXPENSES REQUI	ESTED: (OBTAIN	RECEIPTS FOR ALL I	NCURRED EXPENSES)
	<u>APPRO</u>	OXIMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$650.00</u>		<u>140.16.100.2240.514/515.6360</u>
Transportat	tion \$1,050.40	Mode	140.16.100.2240.514/515.6582
Rental Car	<u>\$140.67</u>		<u>140.16.100.2240.514/515.6582</u>
Meals	<u>\$366.00</u>		<u>140.16.100.2240.514/515.6582</u>
Lodging	<u>\$ 899.04</u>		140.16.100.2240.514/515.6582
Substitutes			
TOTAL	<u>\$3,106.11</u>		
The District will	(or) will not ⊠	receive reimbursement fr	om outside sources.
Purpose of travel: <u>T</u>	o attend the EdLe	ader21 Annual Confere	ence.
Outcomes and acade through applicable and challenges in the	sessions will assist	lents and staff: We are in providing a wider k	members of this organization. Information gained nowledge base and direction for educational changes
Submitted by: Sign	nature		Date
Prin (cipal/Supervisor	elsu- nt/Superintendent	Date Date Date