

**GOVERNING BOARD AGENDA ITEM FORM
AMPHITHEATER UNIFIED SCHOOL DISTRICT NO. 10**

DATE OF MEETING: October 5, 2010

TITLE: Approval of Out of State Travel

BACKGROUND:

STAFF

Foster Hepler, Andrew Heinemann, Monica Nelson, Marcia Volpe, Robert Hehli, and Robert Stoner from Mesa Verde, Harelson, Coronado, CDO, Nash, and Keeling, respectively, request permission to attend the National Staff Development Council Annual Conference in Atlanta, Georgia, December 3-8, 2010. Approximate cost of the travel is \$11,476 and will be paid for by federal funds designated for staff development.

Joseph Paddock from the District Offices requests permission to attend the NFHS/AIAAA Athletic Directors Conference in Orlando, Florida, December 16-20, 2010. Approximate cost of the travel is \$2,372 and will be paid for by site maintenance and operations funds designated for staff development. One school day will be missed.

Armando Soto from Amphitheater High School requests permission to attend the NFHS/AIAAA Athletic Directors Conference in Orlando, Florida, December 16-20, 2010. Approximate cost of the travel is \$1,577 and will be paid for by auxiliary account funds and maintenance and operations funds designated for staff development. One school day will be missed.

David Thatcher from Canyon del Oro High School requests permission to attend the NFHS/AIAAA Athletic Directors Conference in Orlando, Florida, December 16-20, 2010. Approximate cost of the travel is \$1,577 and will be paid for by student activity funds and maintenance and operations funds designated for staff development. One school day will be missed.

STUDENTS

Mick Stewart, Cindy Rolewski, Erin Geyer, Mark Geyer, Thomas Holiday, Norma Gonzales, and Will Broussard from La Cima Middle School request permission to take 40 students to the Catalina Island Marine Institute in Tonyon Bay, California, April 26-30, 2011. Approximate cost of the travel is \$13,737 and will be paid for by tax credits and auxiliary funds. Three school days will be missed and substitutes are required.

Jim Norby and Pam Short from Ironwood Ridge High School request permission to take 20 students from DECA to the Western Leadership Conference in Washington, D.C., November 11-14, 2010. Approximate cost of the travel is \$10,759 and will be paid for by tax credits, student activity funds, and state funds. Two school days will be missed and a substitute is required.

Jim Norby from Ironwood Ridge High School requests permission to take 10 students from DECA to the International Career Development Conference in Orlando, Florida, April 29-May 3, 2011. Approximate cost of the travel is \$10,250 and will be paid for by tax credits, student activity funds, and state funds. Four school days will be missed and a substitute is required.

BUDGET CODE KEY		
140-11-100-2210-510-6360	Title II	Staff development, registration
140-11-100-2210-510-6582	Title II	Staff development, travel
001-00-620-2210-512-6360	M & O	Athletics, staff development, registration
001-00-620-2210-512-6582	M & O	Athletics, staff development, travel
525-00-620-3400-281-6582	Auxiliary	Athletics, bookstore, AHS, travel
850-00-620-3400-282-6582	Student Activities	Athletics, bookstore, CDO, travel
400-11-270-2190-280-6360	CTE Priority	Student support svcs., IRHS, registration
526-00-100-3400-280-6892	Tax Credit	Bookstore, IRHS, student travel
850-00-100-3400-280-6892	Student Activities	Bookstore, IRHS, student travel
526-00-100-3400-280-6519	Tax Credit	Bookstore, IRHS, student transportation
850-00-100-3400-280-6519	Student Activities	Bookstore, IRHS, student transportation
400-11-270-2190-280-6582	CTE Priority	Student support svcs., IRHS, travel
400-11-270-2190-280-6113	CTE Priority	Student support svcs., IRHS, substitute
525-00-100-1001-165-6892	Auxiliary	Classroom instr., La Cima, student travel
526-00-100-1001-165-6892	Tax Credit	Classroom instr., La Cima, student travel
525-00-100-1001-165-6519	Auxiliary	Classroom instr., La Cima, student transp.
526-00-100-1001-165-6519	Tax Credit	Classroom instr., La Cima, student transp.
525-00-100-1001-165-6113	Auxiliary	Classroom instr., La Cima, substitute
526-00-100-1001-165-6113	Tax Credit	Classroom instr., La Cima, substitute

ASSOCIATE SUPERINTENDENT
SIGNATURE:

Patrick Nelson

SUPERINTENDENT
SIGNATURE:

Traci Balentine

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): Foster Hepler Andrew Heinemann SCHOOL: District Offices
Monica Nelson Marcia Volpe Department (opt.): _____
Robert Hehli Robert Stoner DATE(S): Dec. 3 - 8, 2010

ACTIVITY/EVENT: National Staff Development Council Annual Conference

LOCATION: Atlanta, Georgia

ABSENCE: # Days 6 Sub Required: Yes No # of School Days Missed 4

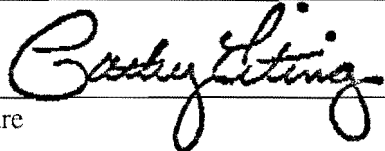
EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)


	<u>APPROXIMATE COST</u>	<u>BUDGET CODE/DESCRIPTION</u> (Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$ 3,924</u>	<u>140.11.100.2210.510.6360</u>
Transportation	<u>\$ 2,278</u> Mode <u>air</u>	<u>140.11.100.2210.510.6582</u>
Rental Car	_____	_____
Meals	<u>\$ 1,496</u>	<u>140.11.100.2210.510.6582</u>
Lodging	<u>\$ 3,778</u>	<u>140.11.100.2210.510.6582</u>
Substitutes	_____	_____
TOTAL	<u>\$11,476</u>	

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

Purpose of travel: To attend Annual National Staff Development Council Conference in Atlanta, GA

Outcomes and academic benefits to students and staff: To provide administrators with knowledge and skills to create high quality professional development that will promote student achievement.

Submitted by:  9/22/10
Signature Date

Principal/Supervisor Date
 9-23-10
Associate Superintendent/Supervisor 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): Joseph Paddock _____

SCHOOL: District Offices
Department (opt.): Interscholastic
DATE(S): 12/16/10-12/20/10

ACTIVITY/EVENT: NFHS/AIAAA Athletic Directors Conference

LOCATION: Orlando, Florida

ABSENCE: # Days 5 Sub Required: Yes No # of School Days Missed 1

EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

<u>APPROXIMATE COST</u>		<u>BUDGET CODE/DESCRIPTION</u>
Registration	<u>\$415.00</u>	<u>001-00-620-2210-512-6360</u>
Transportation	<u>\$700.00</u> Mode <u>Airplane</u>	<u>001-00-620-2210-512-6582</u>
Rental Car	<u>\$290.00</u>	<u>001-00-620-2210-512-6582</u>
Meals	<u>\$176.00</u>	<u>001-00-620-2210-512-6582</u>
Lodging	<u>\$791.00</u>	<u>001-00-620-2210-512-6582</u>
Substitutes	_____	_____
TOTAL	<u>\$2,372.00</u>	

(Note: Tax credit contributions are District funds and require a budget code.)

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

Purpose of travel: NFHS/AIAAA Athletic Directors Conference

Outcomes and academic benefits to students and staff: Completion of course work and workshops in safety, budget and other areas of athletics.

Submitted by: Joseph Paddock _____ 9/27/10
Signature Date

Principal/Supervisor _____ Date
Patrick Nelson 9-27-10

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): Armando Soto

SCHOOL: AHS
 Department (opt.): _____
 DATE(S): 12/16/10 to 12/20/10

ACTIVITY/EVENT: NFHS/AIAAA ATHLETIC DIRECTORS CONFERENCE

LOCATION: Orlando, Florida

ABSENCE: # Days 5 Sub Required: Yes No # of School Days Missed 1

EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

	<u>APPROXIMATE COST</u>		<u>BUDGET CODE/DESCRIPTION</u>
			<small>(Note: Tax credit contributions are District funds and require a budget code.)</small>
Registration	<u>\$330.00</u>		<u>001 00 620 2210 512 6360</u>
Transportation	<u>\$700.00</u>	Mode <u>Plane</u>	<u>525 00 620 3400 281 6582</u>
Rental Car	_____		_____
Meals	<u>\$176.00</u>		<u>525 00 620 3400 281 6582</u>
Lodging	<u>\$371.25</u>		<u>525 00 620 3400 281 6582</u>
Substitutes	_____		_____
TOTAL	<u>\$1577.25</u>		

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

Purpose of travel: NFHS/AIAAA Athletic Directors Conference

Outcomes and academic benefits to students and staff: Increase knowledge with issues in the athletic director field.

Submitted by: *Armando Soto* 9/27/10
 Signature Date
Patricia Davis 9/27/10
 Principal/Supervisor Date
Patrick Nelson 9-27-10
 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): David Thatcher

SCHOOL: CDO
Department (opt.): _____
DATE(S): 12/16/10 to 12/20/10

ACTIVITY/EVENT: NFHS/AIAAA ATHLETIC DIRECTORS CONFERENCE

LOCATION: Orlando, Florida

ABSENCE: # Days 5 Sub Required: Yes No # of School Days Missed 1

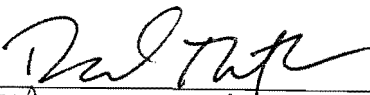

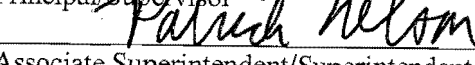
EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

	<u>APPROXIMATE COST</u>		<u>BUDGET CODE/DESCRIPTION</u>
			<small>(Note: Tax credit contributions are District funds and require a budget code.)</small>
Registration	<u>\$330.00</u>		<u>001 00 620 2210 512 6360</u>
Transportation	<u>\$700.00</u>	Mode <u>Plane</u>	<u>850 00 620 3400 282 6582</u>
Rental Car	_____		_____
Meals	<u>\$176.00</u>		<u>850 00 620 3400 282 6582</u>
Lodging	<u>\$371.25</u>		<u>850 00 620 3400 282 6582</u>
Substitutes	_____		_____
TOTAL	<u>\$1577.25</u>		

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

Purpose of travel: NFHS/AIAAA Athletic Directors Conference

Outcomes and academic benefits to students and staff: Increase knowledge with issues in the athletic director field.

Submitted by:  9/24/10
Signature _____ Date _____
 9/24/10
Principal/Supervisor _____ Date _____
 9-27-10
Associate Superintendent/Superintendent _____ 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: 10

NAME OF SCHOOL GROUP/CLUB/ENTITY: **DECA**

STAFF ADVISOR(S)/CHAPERONES: **Jim Norby**

ABSENCE: # Days 5 Sub Required: Yes No # of School Days Missed 4

ACTIVITY / EVENT / PURPOSE OF TRAVEL: **International Career Development Conference**

DESTINATION OF TRAVEL: **Orlando, FL**

DATES OF TRAVEL: **April 29-May 3, 2011**

ACADEMIC BENEFITS TO STUDENTS: **DECA National Competition for College Scholarships**

PROPOSED METHOD OF TRANSPORTATION:

District-owned vehicles

Transportation approval: _____

Other **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	Teacher <u>\$130</u>	<u>400.11.270.2190.280.6360</u>
	Students <u>\$1,300</u>	<u>526/850-00-100-3400-28-6892</u>
Transportation	Teacher <u>\$500</u>	<u>400.11.270.2190.280.6582</u>
	Students <u>\$5,000</u>	<u>526/850-00-100-3400-280-6519</u>
Meals	Teacher <u>\$295</u>	<u>400.11.270.2190.280.6582</u>
	Students self pay	_____
Lodging	Teacher <u>\$750</u>	<u>400.11.270.2190.280.6582</u>
	Students <u>\$1,875</u>	<u>526/850-00-100-3400-280-6892</u>
Substitutes	<u>\$400</u>	<u>400.11.270.2190.280.6113</u>
TOTAL	<u>\$10,250</u>	

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

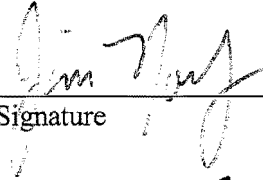
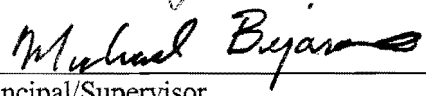

HOW ARE CHAPERONE EXPENSES PAID? N/A

COST TO EACH STUDENT \$ 717.50 (\$130 reg. \$500 air, \$100 meals, \$187.50 lodging)

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

FUNDING SOURCE(S): Student Store

FUNDRAISING ACTIVITIES PLANNED (If applicable):
Car Washes

SUBMITTED BY:	<u></u>	<u>9-21-10</u>
	Signature	Date
APPROVED BY:	<u></u>	<u>9/21/10</u>
	Principal/Supervisor	Date
	<u></u>	<u>9-24-10</u>
	Associate Superintendent/Superintendent	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: 20

NAME OF SCHOOL GROUP/CLUB/ENTITY: DECA

STAFF ADVISOR(S)/CHAPERONES: Jim Norby, Pam Short

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

ACTIVITY / EVENT / PURPOSE OF TRAVEL: Western Region Leadership Conference

DESTINATION OF TRAVEL: Washington D.C.

DATES OF TRAVEL: November 11 - 14, 2010

ACADEMIC BENEFITS TO STUDENTS: Workshops pertaining to careers in marketing/competitive event preparation

PROPOSED METHOD OF TRANSPORTATION:

District-owned vehicles

Transportation approval: _____

Other 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	<u>Teacher \$135</u>	<u>400.11.270.2190.280.6360</u>
	<u>Students \$2,700</u>	<u>526/850-00-100-3400-280-6892</u>
Transportation	<u>Teacher \$300</u>	<u>400.11.270.2190.280.6582</u>
	<u>Students \$6,000</u>	<u>526/850-00-100-3400-280-6519</u>
Meals	<u>Teacher \$162</u>	<u>400.11.270.2190.280.6582</u>
	<u>Students self pay</u>	_____
Lodging	<u>Teacher \$507</u>	<u>400.11.270.2190.280.6582</u>
	<u>Students \$955</u>	<u>526/850-00-100-3400-280-6892</u>
Substitutes	<u>200</u>	<u>400.11.270.2190.280.6113</u>
TOTAL	<u>\$10,759</u>	

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

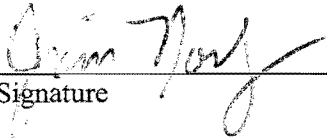
HOW ARE CHAPERONE EXPENSES PAID? By chaperone


COST TO EACH STUDENT \$ 1042


HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? club funds, fund raising, tax credit

FUNDING SOURCE(S): club funds, fund raising, tax credits

FUNDRAISING ACTIVITIES PLANNED (If applicable):
car washes and bake sales

SUBMITTED BY:  9-21-10
Signature Date

APPROVED BY:  9/21/10
Principal/Supervisor Date

 9-24-10
Associate Superintendent/Superintendent 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: La Cima

ESTIMATED NUMBER OF STUDENTS: 40

NAME OF SCHOOL GROUP/CLUB/ENTITY: Science

STAFF ADVISOR(S)/CHAPERONES: Mick Stewart, Cindy Rolewski, Erin Geyer, Mark Geyer, Thomas Holiday. Alternates--Norma Gonzales, Will Broussard.

ABSENCE: # Days 3 Sub Required: Yes No # of School Days Missed 3

ACTIVITY / EVENT / PURPOSE OF TRAVEL: Catalina Island Marine Institute Science Enrichment Trip

DESTINATION OF TRAVEL: Catalina Island Marine Institute Tonyon Bay CA.

DATES OF TRAVEL: 26 April 2011-30 April 2011

ACADEMIC BENEFITS TO STUDENTS: State Standards

STRAND 4: LIFE SCIENCE

Concept 3: Populations of Organisms in Ecosystems

PO 1: Compare food chains in a specified ecosystem...

PO 3: Analyze the interactions of living organisms with their Ecosystems – limiting factors and carrying capacity

STRAND 6: EARTH AND SPACE SCIENCE

Concept 2: Earth's Processes and Systems

PO 5: Relate plate boundary movements to their resulting landforms

PROPOSED METHOD OF TRANSPORTATION:

District-owned vehicles

Transportation approval:

Other Bee Line Tours, PO Box 17691, Tucson, AZ Tel: 520-760-8784

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	<u>\$9812.00</u>	<u>525-00-100-1001-165-6892</u>

526-00-100-1001-165-6892

Transportation	<u>\$3025.00</u>	<u>525-00-100-1001-165-6519</u> <u>526-00-100-1001-165-6519</u>
Meals	<u>included</u>	_____
Lodging	<u>included</u>	_____
Substitutes	<u>\$900.00</u>	<u>525-00-100-1001-165-6113</u> <u>526-00-100-1001-165-6113</u>
TOTAL	<u>\$13737.00</u>	

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

HOW ARE CHAPERONE EXPENSES PAID? Trip Funds

COST TO EACH STUDENT \$ 350.00

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

FUNDING SOURCE(S): Auxiliary, Tax Credits and PTO funds

FUNDRAISING ACTIVITIES PLANNED (If applicable):

SUBMITTED BY: *m j Stewart* 14 Sept 2010
Signature Date

APPROVED BY: *Christine Sullivan* 9-15-10
Principal/Supervisor Date

Patricia Wilson 9-27-10
Associate Superintendent/Supervisor Date