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: CDO			
ESTIMATED NUMBI	ER OF STUDENTS: 65		
NAME OF SCHOOL O	GROUP/CLUB/ENTITY:	CDO Band	<u>!</u>
STAFF ADVISOR(S)/Alex Merideth, Terra	CHAPERONES: <u>Danie</u> A Harper, Linda Brady	l Bitter, Bill Erik Binnie	<u>Crawford, Gary Burchard, Tom Edelbrock</u> e, Luis Lopez, Jeff Albrecht
ABSENCE: # Days 4	Sub Required: X Yes	☐ No	# of School Days Missed 1
ACTIVITY / EVENT /	PURPOSE OF TRAVEL	: <u>Concert Bar</u>	and Festival and Competition
DESTINATION OF TR	RAVEL: <u>Anaheim, Cali</u>	<u>fornia</u>	
DATES OF TRAVEL: ACADEMIC BENEFIT feedback from high bands from across to	TS TO STUDENTS: Ily qualified judges i	Authentic p n a compe	performance opportunity and constructive etitive setting. Students will compete with
PROPOSED METHOD District-owned vehi Transportation approval Other Mountain Vic	:	N:	
Are expenses paid from Parent Organization Yes	any of the following acco	ounts? Auxilia	ary Tax Credits <u>Yes</u> Club Funds
EXPENSES I	REQUESTED: (OBTAI	N RECEIPTS	'S FOR ALL INCURRED EXPENSES)
	APPROX. COST	•	BUDGET CODE
Registration	<u>\$12,220</u>		<u>526-00-100-1001-282-6892</u>
Transportation	<u>\$7,250</u>		526-00-100-1001-282-6519
Meals	<u>o</u>		<u>N/A</u>
Lodging	<u>\$9,340</u>		<u>526-00-100-1001-282-6892</u>

Substitutes

\$100

526-00-100-100 1-282-6113

WILL THE DISTRICT RECEIVE REIMBURSEMENT? $\underline{\text{N/A}}$ IF SO, SOURCE & AMOUNTS: $\underline{\text{N/A}}$

HOW ARE CHAPERONE EXPENSES PAID? Factored into student Cost

COST TO EACH STUDENT \$ 550

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? **Scholarships and fundraising opportunities**

FUNDING SOURCE(S): Community

FUNDRAISING ACTIVITIES PLANNED (If applicable):

Snack Bar employment, Car washes, Percentage nights, Applebee's Breakfast

SUBMITTED BY: _	9)	211
	Signature	Date
APPROVED BY:	Principal/Supervisor	2/2/17
	Timelpan Supervisor	Date
_	Inone heesen	2/13/17
	Associate Superintendent/Superintendent	Date

EMPLOYEE(S): Jane	ele Roche	SCHOOL: AHS
	· · · · · · · · · · · · · · · · · · ·	Department (opt.):
		DATE(S): March 22-26, 2017
ACTIVITY/EVENT: Ro	cky Mountain Athletic Trainer's	Association Annual Meeting and Clincal Symposium
LOCATION: Westm	inster, CO	
ABSENCE: # Days	5 Sub Required: ☐Yes ☒N	# of School Days Missed 3
EXPENSES REQUESTE	ED: (OBTAIN RECEIPTS FOR A	LL INCURRED EXPENSES)
	APPROXIMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$125.00</u>	<u>525.00.620.3400.281.6360</u>
Transportation	\$360.00 Mode <u>Ai</u>	r/Shuttle 525.00.620.3400.281.6582
Rental Car		
Meals	<u>\$295.00</u>	530.00.620.2210.512.6582
Lodging	<u>\$625.50</u>	<u>525.00.620.3400.281.6582</u>
Substitutes		·
TOTAL	<u>\$1405.50</u>	
The District will (or)	will not receive reimburseme	nt from outside sources.
-	ipate in continuing education co	urses and be up to date with evidence based methods in
athletic training.	•	•
		attending this conference, I will be listening to speakers
	otessional knowledge that will di aining and Sports Medicine.	rectly affect Amphitheater student athletes using best
The travel is necessary fo	r the implementation of the projec	funding the travel.
\bigcap	and Pola	-
Submitted by: Signature	e par	<u>2/10/17</u> Date
()MI	and A A N 10.	
Dringing	MAND (MATIN) /Supervisor	<u>2/10/17</u> Date
Timeipai		
Associate	Superintendent/Superintendent	<u> </u>

EMPLOYEE(S):	William Yaw	SC	HOOL: AHS	
			Department (opt.):	
	- bounces	DA	ATE(S): <u>03/22-26, 2017</u>	
	•		•	
	•••	hletic Trainers Associati		
LOCATION: 1	The Westin Westminsto	er Hotel, 10600 Westmins	ster Blvd, Westminster, CO	
ABSENCE: #	Days 5 Sub Require	ed: ⊠Yes □No	# of School Days Missed 3	
EXPENSES REQU	JESTED: (OBTAIN RE	CEIPTS FOR ALL INCU	RRED EXPENSES)	
	<u>APPROXI</u>	MATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds a require a budget code.)	ıno
Registration	n <u>\$125.00</u>		<u>260-17-362-2210-281-6360</u>	
Transporta	ation	Mode		
Rental Car	 .	,		
Meals	\$295.00		<u>530-00-620-2210-512-6582</u>	
Lodging	<u>\$625.50</u>		<u>525-00-620-2210-281-6582</u>	
Substitutes	\$330.00		260-17-362-2210-281-6113	
TOTAL	<u>\$1,375.50</u>			
The District will	(or) will not 🛭 recei	ve reimbursement from ou	tside sources.	
Purpose of travel: A	Annual conference on c	urrent trends and practi	ces for Athletic Trainers.	
	emic benefits to students		onference will provide training on current issue	<u>es</u>
The travel is neces	ssary for the implemental	yon of the project funding the	ne travel.	
Submitted by:	Willin K Yaw &		2/13/17	
Si	ignature		Date	
	MSouh		<u> </u>	
Pı	inclpal/Supervisor		Date	
	More hel	A comment	<u> 413/17</u>	
A!	ssociate Superintendent/S	unerintendent	Date /	

EMPLOYEE(S): Cas	sidy Edwards	SCHOOL: <u>CDO</u> Department (opt.): DATE(S): <u>3/22-26, 2017</u>
	ocky Mountain Athletic Trainers Assoc Vestin Westminster Hotel, 10600 Westm	
ABSENCE: # Days	s 5 Sub Required: ⊠Yes □No	# of School Days Missed 3
EXPENSES REQUEST	ED: (OBTAIN RECEIPTS FOR ALL IN	CURRED EXPENSES)
	APPROXIMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$125.00</u>	<u>260-17-362-2210-282-6360</u>
Transportation	Mode	
Rental Car		
Meals	<u>\$295.00</u>	530-00-620-2210-512-6582
Lodging	<u>\$625.50</u>	<u>525-00-620-2210-282-6582</u>
Substitutes	\$330.00	<u>260-17-362-2210-282-6113</u>
TOTAL	<u>\$1,375.50</u>	
The District will [(or)	will not 🛛 receive reimbursement from	outside sources.
Purpose of travel: Annu	al conference on current trends and pra	actices for Athletic Trainers.
Outcomes and academic and updated research for		al conference will provide training on current issues
Submitted by: Signat	for the implementation of the project fundi	ng the travel. 1-36-17 Date 1/36/7
Assoc	iate Superintendent/Superintendent	Date '

EMPLOYEE(S):	George	Goodridge	SCH	HOOL: <u>IRHS</u>
	<u>Tayler</u>	Espinoza	I	Department (opt.):
		Recovery and the latest and the late	DA	TE(S): <u>03/22-26/2017</u>
			etic Trainers Associatio	
LOCATION:	The Westin	Westminster l	Hotel 10600 Westminst	ter Blvd Westminster, CO.
ABSENCE:	Days <u>5</u>	Sub Required:	⊠Yes □No	# of School Days Missed 3
EXPENSES REQU	JESTED: (OBTAIN RECI	EIPTS FOR ALL INCUI	RRED EXPENSES)
		<u>APPROXIM.</u>	ATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registratio	on <u>\$25</u>	0.00		<u>260-17-362-2210-280-6360</u>
Transport	ation		Mode	
Rental Car	<u>\$60</u>	<u>0.00</u>		530-00-620-2210-512-6582
Meals	<u>\$59</u>	0.00	·	<u>530-00-620-2210-512-6582</u>
Lodging	<u>\$62</u> :	<u>5.50</u>		<u>525-00-620-2210-280-6582</u>
Substitutes	<u>\$33</u> 0	0.00		<u>260-17-362-2210-280-6113</u>
TOTAL	<u>\$2,3</u>	95.50		
The District will	or) will i	not 🛭 receive	reimbursement from out	side sources.
Purpose of travel:	Annual cor	iference on cur	rent trends and practic	es for Athletic Trainers.
Outcomes and academic and updated research licensure and nati	rch for Atl	hletic Trainers.	nd staff: This annual co. This also allows AT's t	onference will provide training on current issues to get some of their CEUs to maintain state
	-		on of the project funding	the travel.
			_	
Submitted by:	Signature	exclusion	ACLL	Ol For 17 Date
,	Mata	entil	wet	2/2/17
ي	Principal/Su			Date
	Dren	- July		<u> 3/13/17</u>
-	Associate S	uperintendent/S	uperintendent	Date /

EMPLOYEE(S): <u>Jane</u>	<u>Ellis</u>	SC	HOOL: <u>District Offices</u>
			Department (opt.): <u>Payroll</u>
		DA	ATE(S): <u>April 19-21, 2017</u>
A CTIVITY/EVENTE, E.		Conference	
ACTIVITY/EVENT: En		Conterence	
LOCATION: <u>Las Ve</u>	gas, Nevada		
ABSENCE: # Days	3 Sub Required:	□Yes ⊠No	# of School Days Missed 3
EXPENSES REQUESTE	ED: (OBTAIN RECI	EIPTS FOR ALL INCU	RRED EXPENSES)
	<u>APPROXIM</u>	ATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	\$ <u>750.00</u>		001-00-100-2579-520-6360
Transportation &	<u>255.00</u>	Mode <u>Air</u>	001-00-100-2579-520-6582
Rental Car	\$25.00 Shuttle		001-00-100-2579-520-6582
Meals	<u>\$57.00</u>		001-00-100-2579-520-6582
Lodging	Included		
Substitutes			
TOTAL \$	1.087.00		
Γhe District will [] (or)	will not ⊠ receive	reimbursement from ou	tside sources
Purpose of travel: Novati	me User Conferenc	e - time keeping syster	<u>n</u>
			derstand key features of the Novatime system
<u>hat will ensure our wor</u> ssues.	kforce processes are	e efficient and effective	e. Gain more knowledge of payroll compliance
	. 21 - 1 - 1 - 1 - 2 - 21 - 1	C41	1. 4 1
The travel is necessary for	the implementation	of the project funding t	
Submitted by: January	4 Ellis		
Signature	50		ale le
Principal/	Supervisor		
1 Thicipal			2/12/
Associate	Superintendent/Superi	erintendent	

EMPLOYEE(S): Nico	<u>ole Stern</u>	SCHO	OOL: <u>District Offices</u>
		De	partment (opt.): <u>Technology</u>
		DAT	E(S): <u>05/6/2017 - 05/11/2017</u>
	der Connect Conference		
LOCATION: San Ar	<u>itonio, TX</u>		
ABSENCE: # Days	s 6 Sub Required: ☐Y	es ⊠No	# of School Days Missed 4
EXPENSES REQUESTI	ED: (OBTAIN RECEIPT	S FOR ALL INCURF	RED EXPENSES)
	<u>APPROXIMATE</u>	COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$950.00</u>		0010010025795506360
Transportation	<u>\$515.00</u>	Mode <u>Airfare</u>	0010010025795506582
Rental Car			
Meals	<u>\$220.00</u>	·	0010010025795506582
Lodging	<u>\$1445.00</u>		0010010025795506582
Substitutes			
TOTAL	<u>\$3130.00</u>		
The District will \(\int \(\text{Or} \)	will not ⊠ receive reim	ıbursement from outsi	de sources.
_ 、 /	,		
Purpose of travel: <u>Tyler</u>	Connect Conference		
			redge and tools to aid in the successful usage
	er, from both a user and ach others and support i		pective. Gain additional information and egarding Tyler.
The travel is necessary	for the inpotementation of	the project funding th	e travel
Submitted by: Signatu	re	—	$\frac{2-3}{\text{Date}} - \frac{2}{3} = \frac{2}{3$
. Al	1/6		2/3/2017
Principa	al/Supervisor		1/3/12
Associa	ta Superintendent/Superir	ntandant	Date

EMPLOYEE(S):	Elizabeth Wick	Donna Kimble	SCHOOL: Holaway	
	Patricia Patchin	Jill Sincliar	Department (opt.):	
	Chris Gutierrez		DATE(S): <u>6/20/17-6/23/17</u>	
ACTIVITY/EVEN	VT: AVID (Advance	ment Via Individual I	Determination) Summer Institute	
LOCATION: <u>D</u>	Dallas, TX			
ABSENCE: #	Days 4 Sub Req	uired: Yes No	# of School Days Missed 0	
EXPENSES REQU	JESTED: (OBTAIN	RECEIPTS FOR ALL	INCURRED EXPENSES)	
	<u>APPRO</u>	OXIMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds a require a budget code.)	ınd
Registratio	on <u>\$4000</u>		100-17-100-2210-108-6360	
Transport	ation <u>\$5000</u>	Mode <u>Air/T</u>	<u>100-17-100-2210-108-6582</u>	
Rental Car				
Meals	<u>\$1080.00</u>		100-17-100-2210-108-6582	
Lodging	<u>\$4420</u>		<u>100-17-100-2210-108-6582</u>	
Substitutes				
TOTAL	<u>\$14500</u>			
The District will] (or) will not 🛭 r	eceive reimbursement t	from outside sources.	
			tute to learn the AVID program in an effort to better to help students get on the college bound track.	
Outcomes and acad	lemic benefits to stud	ents and staff: Increase	se teacher knowledge. Increase student achievement.	
	111			
	(. Huture	}		
Submitted by: Sig	_ nature	/	<u>1/20/17</u> Date	

(. Guturnez	1/20/17
Principal/Supervisor	Date
Main Jelan	<u> </u>
Associate Superintendent/Superintendent	Date /

rev. 9/21/05

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

EMPLOYEE(S): <u>Tas</u> s	si Call, Jennifer Letts, Christine Roche, Katl	herine Floyd, Jennifer Queiruga-Swingle,
Rebecca Burnett, Bren	da King, Cary Reis, Phil Tilicki & Gina Stic	ekle
SCI	HOOL: <u>AMS</u>	
***************************************	De	epartment (opt.):
· .	DAT	E(S): <u>July 11-14, 2017</u>
	777 X 11 11 170 4 1	the N Comment To this to the
	/ID (Advancement Via Individual Determin	ation) Summer Institute
LOCATION: <u>San An</u>	atonio, TX	
ABSENCE: # Days	4 Sub Required: ☐Yes ☒No	# of School Days Missed 0
EXPENSES REQUESTI	ED: (OBTAIN RECEIPTS FOR ALL INCURI	RED EXPENSES)
	APPROXIMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$7,600.00</u>	100-17-100-2210-166-6360
Transportation	\$5,000.00 Mode <u>airline/taxi</u>	100-17-100-2210-166-6582
Rental Car	· · · · · · · · · · · · · · · · · · ·	
Meals	<u>\$2,160.00</u>	100-17-100-2210-166-6582
Lodging	<u>\$2,970.00</u>	100-17-100-2210-166-6582
Substitutes		
TOTAL	<u>\$17,730.00</u>	
Purpose of travel: AVID	will not improved reimbursement from outs (Advancement Via Individual Determinina) he program at our school. Our team will con	tion) training for AVID Site Team to support
site team will explore da targets our underserved teachers; helps schools	nta to construct an action plan for effective in I students (minority and average achievers); build community support systems for school	earn effective instructional practices and our mplementation at our site. The AVID program provides quality staff development for success; and addresses how to grant equitable
Submitted by:	Coula for all students.	1/30/17

Date

Signature

Principal/Supervisor

Date

1/3/1/2

Associate Superintendent/Superintendent

rev. 9/21/05

EMPLOYEE(S):	Sandy Schiffman	<u>Megan Franklin</u>	SCHOOL: Keeling
	Bethany Stocker	Annette Orelup	Department (opt.):
			DATE(S): <u>July 11-14, 2017</u>
ACTIVITY/EVEN	IT: <u>Advancement Vi</u>	a Individual Determinat	ion Conference
LOCATION: <u>S</u>	an Antonio, TX		
ABSENCE: #	Days <u>3</u> Sub Requ	nired: Yes No	# of School Days Missed 0
EXPENSES REQU	JESTED: (OBTAIN	RECEIPTS FOR ALL IN	CURRED EXPENSES)
	<u>APPRO</u>	XIMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registratio	on <u>\$2900.00</u>		<u>100 17 100 2210 109 6360</u>
Transport	ation <u>\$2500.00</u>	Mode <u>Airplan</u> e	100 17 100 2210 109 6582
Rental Car			
Meals	<u>\$596.00</u>		<u>100 17 102 2210 109 6582</u>
Lodging	<u>\$900.00</u>		<u>100 17 102 2210 109 6582</u>
Substitutes	Separate Control of the Control of t		
TOTAL	<u>\$6896.00</u>		
The District will] (or) will not ⊠ re	ceive reimbursement fron	n outside sources
Purpose of travel: [track for going to		rogram to better prepai	e students for middle school and to get them on
Outcomes and acad	emic benefits to stude	ents and staff: To increa	se teacher knowledge & student achievement.
The travel is necess	ary for the implement	ation of the project fundi	ng the travel.
Submitted by:	M. Howa nature	P	1-31-17
Sig			1 21 17
Pri		religo	7-31-1 Date
1111	Konin De	Dev_	<u>3/13/17</u>
Ass	sociate Superintendent	/Superintendent	Date '

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

EMPLOYEE(S): <u>Ch</u>	<u>ristine Sullivan, Allison Januszewski</u>	, Tiffany Camarena, Kate Guymon, Abyee Maracigar		
Cyra Sadowl, Charlot	te Glenn, Amanda Trejo, and Marni	Gould. Alternates: Julie Valenzuela, Polly Kimminau,		
and Andragayle Pye.				
termental termen	SCHOOL: La Cima Middle			
	Department (opt.):			
 		DATE(S): <u>July 11- July 14, 2017</u>		
	dvancement Via Individual Determin ntonio, TX	ation Summer Institute		
ABSENCE: # Days	s 4 Sub Required: Yes No	# of School Days Missed 0		
EXPENSES REQUEST	ED: (OBTAIN RECEIPTS FOR ALL	INCURRED EXPENSES)		
	APPROXIMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)		
Registration	<u>\$6,080.00</u>	100-17-100-2210-165-6360		
Transportation	<u>\$4,200.00</u> Mode <u>Air</u>	100-17-100-2210-165-6582		
Rental Car	<u>\$300.00</u>	<u>100-17-100-2210-165-6582</u>		
Meals	<u>\$1,845.00</u>	100-17-100-2210-165-6582		
Lodging	<u>\$3,257.40</u>	100-17-100-2210-165-6582		
Substitutes				
TOTAL	<u>\$15,682.40</u>	-		

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

Purpose of travel: <u>AVID (Advancement Via Individual Determination) training for AVID Site Team to support the implementation of the program at our school. Our team will consist of the principal, media specialist, and content area teachers.</u>

Outcomes and academic benefits to students and staff: <u>Teachers will learn effective instructional practices and our site team will explore data to construct an action plan for effective implementation at our site. The AVID program targets our underserved students (minority and students in the academic middle); provides quality staff development for teachers; helps schools build community support systems for student success; and addresses how to grant equitable access to rigorous curricula for all students.</u>

The travel is necessary for the implementation of the project funding the travel.

Submitted by:		
	Signature	Date
	Aristine Sulli / Re	1/26/17
	Principal/Supervisor	Date
	Mani helse	2//3/17
	Associate Superintendent/Superintendent	Date /

rev. 9/1/15

EMPLOYEE(S):	<u>Laurie Sheber</u> <u>Ste</u>	phanie Harrison	SCHOOL: <u>Prince</u>
	Jillian Jackson Su	<u>sy Navarro-Danielle (</u>	Goldsmith Department (opt.):
	Bonnie Levine Hilla	ry Kitay	DATE(S): <u>July 11 - 14, 2017</u>
	Γ: <u>Advancement Via Ir</u> in Antonio, Texas	ndividual Determinati	on Summer Institute
ABSENCE: #	Days <u>4</u> Sub Require	d: □Yes ⊠No	# of School Days Missed <u>0</u>
EXPENSES REQU	ESTED: (OBTAIN RE	CEIPTS FOR ALL INC	CURRED EXPENSES)
	<u>APPROXI</u>	MATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds an require a budget code.)
Registration	\$5075.00		100-17-100-2210-1116360
Transporta	tion <u>\$3595.00</u>	Mode <u>Air</u>	100-17-100-2210-111-6582
Rental Car	- GETTETT CONTROLLES CALLEGE AND		WWW Septimental Septiment
Meals	<u>\$1370.00</u>		100-17-100-2210-111-6582
Lodging	<u>\$1900.00</u>		100-17-100-2210-111-6582
Substitutes	**************************************		
TOTAL	\$11940.00		
The District will 🔲	(or) will not receiv	e reimbursement from	outside sources.
	VID (Advancement Vithe implementation of		nation) training for our 4 th and 5 th grade AVID ite.
work with our site t AVID program targ levelopment for tea	team to explore data to gets our underserved s	construct an action p tudents (minority and imunity support system	vill learn effective instructional practices and will lan for effective implementation at our site. The average achievers), provides quality staff ms for school success, and addresses how to grant
The travel is necessa	ry for the implementation	m of the project funding	g the travel.
Submitted by: Sign	larer Watch	oi	2/13/17 Date
Princ	lauf Walch alure Aur Dhy cipal/Supervisor		2/13/17 Date

Associate Superintendent/Superintendent

Date

3/17

rev. 9/1/15