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: AM	<u>1S</u>				
ESTIMATED 1	NUMBER OF STUDENTS:	<u>36</u>			
NAME OF SCI	HOOL GROUP/CLUB/ENTIT	Y: <u>Project</u>	<u>Catalina</u>		
STAFF ADVIS	SOR(S)/CHAPERONES: <u>Ka</u>	thy Floyd,	Kellie Higgins, Tr	echel Gindt,	Phil Tilicki, Dave
ABSENCE: # I	Days 4 Sub Required: 🛛 Ye	s 🗌 No	# of School D	ays Missed <u>4</u>	
ACTIVITY / E	VENT / PURPOSE OF TRAV	EL: Trip to	Catalina Marine In	<u>stitute</u>	
DESTINATION	N OF TRAVEL: <u>Catalina Isl</u>	and, CA			
ACADEMIC B biology, ocea	AVEL: March 6-9, 2018 ENEFITS TO STUDENTS: Inography, ecology, and bals as well as earn points	oiodiversity	. Students will als	so compete t	<u>o name the most</u>
District-own		ION:			
Are expenses pa Parent Organiza	aid from any of the following antion	ecounts? Au	ixiliary <u>X</u> Tax Credit	s <u>X</u> Club Funds	s
EXPE	ENSES REQUESTED: (OBT	TAIN RECE	IPTS FOR ALL IN	CURRED EXI	PENSES)
	APPROX. CO	OST	BUDO	ET CODE	
Registra	stion <u>\$10,200</u>		<u>525/52</u>	<u> </u>	<u>-166-6892</u>
Transpo	ortation <u>\$3,585</u>		<u>525/52</u>	26-00-410-2710)-166-6519
Meals	<u>\$300</u>		<u>525/52</u>	<u> 6-00-100-1001</u>	-166-6892
Lodging	§ \$1,200		525/52	6-00-100-1001	-166-6892
Substitu	ites \$1,760		525/52	6-00-100-1001	-166-6113

<u>\$1,760</u>

<u>525/526-00-100-1001-166-6113</u>

WILL THE DISTRICT RECEIVE REIMBURSEMENT? <u>Yes</u>
IF SO, SOURCE & AMOUNTS: <u>student tuition and tax credit donations</u>

HOW ARE CHAPERONE EXPENSES PAID? included in student cost

COST TO EACH STUDENT \$ 450

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? **Scholarships are made available to students who need them.**

FUNDING SOURCE(S): Tax credit donations

FUNDRAISING ACTIVITIES PLANNED (If applicable):

SUBMITTED BY:	Signature	2/ <u>5/18</u> Date
APPROVED BY:	M hww.do Principal/Supervisor	2-5-18 Date
	Associate Superintendent/Superintendent	<u>\ \ \ \ \ \ \ \ \ \ \ \ \ \</u>

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>CDO</u>					
ESTIM	ATED NUMBER OF	STUDENTS: 3				
NAME	OF SCHOOL GROU	JP/CLUB/ENTITY:	<u>JROTC</u>		,	
STAFF	ADVISOR(S)/CHAI	PERONES: <u>Bobby</u>	<u>Edwards</u>			
ABSEN	NCE: # Days 5 Sub	Required: Yes	⊠ No	# of So	chool Days Missed	<u>3</u>
ACTIV	TITY / EVENT / PUR	POSE OF TRAVEL	: JROTC Air	Rifle C	hampionships	•
DESTI	NATION OF TRAVE	EL: Camp Perry, O	<u>H</u>			
	S OF TRAVEL: <u>21-25</u> EMIC BENEFITS TO		dents develo	op men	tal management	and focus skills
Dis Transpo	OSED METHOD OF The strict-owned vehicles ortation approval:		N:			
	penses paid from any of Organization	of the following acco	ounts? Auxilia	ry	_ Tax Credits	_ Club Funds <u>JROTC</u>
	EXPENSES REQ	UESTED: (OBTAI	N RECEIPTS	FOR A	ALL INCURRED I	EXPENSES)
		APPROX. COST	Γ		BUDGET CODE	
	Registration	<u>0</u>			<u>0</u>	
	Transportation	<u>o</u>	-		US Government	
	Meals	<u>\$150.00</u>		,	Student paid	
	Lodging	<u>0</u>			<u>US Government</u>	
	Substitutes	<u>0</u>			<u>0</u>	• .
	TOTAL	<u>\$150.00</u>				

0116/1	
SUBMITTED BY: Signature	22 Jan, 2018 Date
APPROVED BY: Principal/Supervisor	<u> </u>

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? Students are participating in JROTC fundraisers to pay for individual meal costs.

WILL THE DISTRICT RECEIVE REIMBURSEMENT? No

HOW ARE CHAPERONE EXPENSES PAID? JROTC Fund Raising

IF SO, SOURCE & AMOUNTS:

FUNDING SOURCE(S): **US Army and JROTC**

FUNDRAISING ACTIVITIES PLANNED (If applicable):

Renaissance Festival and Great American Coupon Books

COST TO EACH STUDENT \$ 50

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>			1.4	
ESTIMATED NUMBER O	OF STUDENTS: 2			
NAME OF SCHOOL GRO	DUP/CLUB/ENTITY:	JROTC		
STAFF ADVISOR(S)/CH	APERONES: <u>Bobby</u>	/ Edwards		
ABSENCE; # Days 5 Su	ıb Required: 🗌 Yes	⊠ No	# of School Days Missed 3	
ACTIVITY / EVENT / PU	RPOSE OF TRAVEL	.: JROTC Air	Rifle Championships	
DESTINATION OF TRAV	VEL: Camp Perry, C	<u> </u>		
DATES OF TRAVEL: <u>21-</u> ACADEMIC BENEFITS	25 Mar, 2018 TO STUDENTS: Stu	udents devel	lop mental management and focus skills	
PROPOSED METHOD OF District-owned vehicle Transportation approval: _ Other US Army	S	DN:		
Are expenses paid from an Parent Organization	y of the following ace	ounts? Auxilia	iary Tax Credits Club Funds <u>JROT</u>	<u>C</u>
EXPENSES RE	QUESTED: (OBTA	IN RECEIPT	'S FOR ALL INCURRED EXPENSES)	
	APPROX. COS	T	BUDGET CODE	
Registration	<u>0</u>		<u>0</u>	
Transportation	<u>0</u>		US Government	
Meals	\$100		Student pald	
Lodging	<u>0</u>		US Government	
Substitutes	<u>o</u>		<u>0</u>	
TOTAL	\$100			

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STU PROVISIONS)? Students are participating in JROTC fundraisers to	DENTS (LOW FAMILY INCOME pay for individual meal costs.
FUNDING SOURCE(S): US Army and JROTC	
FUNDRAISING ACTIVITIES PLANNED (If applicable): Renaissance Festival and Great American Coupon Books	
SUBMITTED BY: Boly Edward Signature	<u>31 Jan, 2018</u> Date
APPROVED BY: No Burnett Principal/Supervisor	$\frac{2ll}{Date}$ /18
Associate Superintendent/Superintendent	<u>≯/ 3</u> // 8 Date

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

COST TO EACH STUDENT \$ **50**

HOW ARE CHAPERONE EXPENSES PAID? JROTC Fundraising

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

COLICOL IDITO		
SCHOOL: <u>IRHS</u>		
ESTIMATED NUMBER OF ST	TUDENTS: <u>16</u>	•
NAME OF SCHOOL GROUP/O	CLUB/ENTITY: Choir	
STAFF ADVISOR(S)/CHAPER	ONES: AJ Lepore /Bra	ndi Dignum / Stacie Davis
ABSENCE: # Days 3 Sub Rec	quired: Yes No	# of School Days Missed 0
ACTIVITY / EVENT / PURPOS	SE OF TRAVEL: A Cap r	ella Semi-Finals
DESTINATION OF TRAVEL:	Flower Mound, Texas	
from around the country a	TUDENTS: Students nd be adjudicated by	will compete against other a cappella group a panel of judges to assess the musical ar tudents will be able to use the comments
improve their future perfo competing against which w	ormances.Students w	ill also get to see all the groups they a
PROPOSED METHOD OF TRA District-owned vehicles Fransportation approval: Other Flight, vans Are expenses paid from any of the Parent Organization X	,	oxiliary Tax Credits <u>X</u> Club Funds
EXPENSES REQUES	STED: (OBTAIN RECE	IPTS FOR ALL INCURRED EXPENSES)
	APPROX. COST	BUDGET CODE
Registration	<u>N/A</u>	<u>N/A</u>
Transportation	<u>\$7000</u>	526/850-00-100-1001-280-6519 Parent Org
Meals		Self Paid
Lodging	\$2000	526/850-00-100-1001-280-6892 Parent Org

N/A

N/A

TOTAL

\$9000

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

HOW ARE CHAPERONE EXPENSES PAID? Self-Paid

COST TO EACH STUDENT \$ 500

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? Fundraisers will be held to offset the cost. Scholarships will be provided when necessary to ensure that no student is kept from the trip due to finances.

FUNDING SOURCE(S): Parent Organization, Choir Tax Credit Account,

FUNDRAISING ACTIVITIES PLANNED (If applicable):

<u>UA Football Concessions, Butter Braids sales, Zumba Day, See's Candy, Concert Ticket Sales, Various Restaurant Events</u>

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

SUBMITTED BY:

ŧ

Signature

Date

APPROVED BY:

Principal/Supervisor

Date

Associate Superintendent/Superintendent

Date

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 NUMBE	ER OF STUDENTS: 10		
NAME OF SCHOOL (GROUP/CLUB/ENTITY:	Academic	Decathlon
STAFF ADVISOR(S)/	CHAPERONES: Chris	and Elethia	<u>Yetman</u>
ABSENCE: # Days 7	Sub Required: X Yes	☐ No	# of School Days Missed 5
ACTIVITY / EVENT /	PURPOSE OF TRAVEL	.: <u>National Ac</u>	cademic Decathlon Finals
DESTINATION OF TR	RAVEL: <u>Frisco, Texas</u>		
	April 16 - April 22, 2018 S TO STUDENTS: <u>Ac</u>		<u>mpetitions</u>
District-owned vehing Transportation approval			zona AcDec)
Are expenses paid from Parent Organization		ounts? Auxili	iary Tax Credits <u>Yes</u> Club Funds <u>Yes</u>
EXPENSES I	REQUESTED: (OBTAI	IN RECEIPT	TS FOR ALL INCURRED EXPENSES)
	APPROX. COST	Γ	BUDGET CODE
Registration	<u>\$600.00</u>		<u>526-00-100-1001-282-6892</u>
Transportation	<u>\$7000.00</u>		850/526-00-100-1001-282-6519
Meals	<u>\$4500.00</u>		850/526-00-100-1001-282-6892
Lodging	<u>\$7000.00</u>		850/526-00-100-1001-282-6892
Substitutes	<u>\$1100.00</u>		850/526-00-100-1001-282-6113
TOTAL	\$20,200.00		

WILL THE DISTRICT RECEIVE REIMBURSEMENT? <u>Yes</u>
IF SO, SOURCE & AMOUNTS: <u>Arizona Academic Decathlon for airfare</u>, \$4000

HOW ARE CHAPERONE EXPENSES PAID? Club funds, Tax Credit

COST TO EACH STUDENT \$ 400

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

FUNDING SOURCE(S): N/A

FUNDRAISING ACTIVITIES PLANNED (If applicable): **Bake Sales, Dine-Out Nights, Etc.**

SUBMITTED BY:

Signature

Signature

Date

APPROVED BY:

Principal/Supervisor

Associate Superintendent/Superintendent

Date

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: AHS				
ESTIMATED NUMBER OF STUDENTS: 40				
NAME OF SCHOOL GROUP/CLUB/ENTITY: AHS Media Club, A	rt Club, Photo Club, IRHS Art Club			
STAFF ADVISOR(S)/CHAPERONES: John Parham, Erin Web Bakken	er, Gina Beca, Brian Valencia, Carrie			
ABSENCE: # Days 2 Sub Required: Yes No # of S	chool Days Missed <u>0</u>			
ACTIVITY / EVENT / PURPOSE OF TRAVEL: Visiting Los Ang and Magic Mountain for Art History lessons and unique artistic sul	eles County Museum of Art (LACMA) bject matter.			
DESTINATION OF TRAVEL: Los Angeles County Museum of Art:	5905 Wilshire Blvd, Los Angeles, CA			
DATES OF TRAVEL: April 21, 2018, 12:00 a.m April 22, 2018 bef ACADEMIC BENEFITS TO STUDENTS: Students will be exposed subjects for their art that they do not have access to locally. We particiapte in a guided tour of LACMA, famous for unique articists Six Flags Magic Mountain where they will be collecting unique and human subject matter. Upon return, each student will be just movement. Using sources collected while on the trip, they will have winners artwork will be placed on display at both Ironwood Ridge and staff to enjoy.	to artwork, experience a city, and view hile visiting Los Angeles, students will ork and interactive tours. Students will reference photos of the rollercoasters dged by art teachers under the theme are a week to create their piece, and the			
PROPOSED METHOD OF TRANSPORTATION: District-owned vehicles Gransportation approval:				
Namsportation approval: Other Charter bus is included with the registration. Southwest R	oad Trips, LLC.			
Are expenses paid from any of the following accounts? Auxiliary	_ Tax Credits <u>X_</u> Club Funds <u>X</u>			
EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)				
APPROX. COST	BUDGET CODE			
Registration <u>\$11,000.00</u>	850/526-00-100-1001-281-6892			
Transportation <u>Included in regist.</u>	rev. 10/1/07			

	Meals	Included in regist.		росколого постранувания распорти	
	Lodging	Included in regist.		-	
	Substitute	§ <u>\$0</u>		-	
	TOTAL	<u>\$11,000.00</u>			
WILL T	THE DISTR SOURCE &	ICT RECEIVE REII : AMOUNTS:	MBURSEMENT? <u>no</u> -		
HOW A	ARE CHAPI	ERONE EXPENSES	PAID? This is included in t	<u>he student's fees.</u>	
COST	TO EACH S	TUDENT \$ 275.00			
PROVIS fundrai	SIONS)? <u>Y</u>	Ve have multiple get an equal share	ILABLE TO ALL ELIGIBI fundraisers throughout the of the profits. Money from	he vear. Students par	ticinating in the
FUNDI	NG SOURC	E(S): Shirt sales, ca	ndy sales, and merchandise	sales.	
Art Clu	<u>b will orga</u>	CTIVITIES PLANNI mize shirt fundrais lms events. All club	BD (If applicable): ers. Photo club takes pictu s are selling merchandise to	res at events to raise m help raise money as wel	oney for the trip
					_
SUBMIT	TED BY: 1	Signature		<u>1/3</u> 0/18 Date	
APPROV	ED BY: _	Hunda	Myh	//30//8	
		Principal/Superv	SOI OU	113/18	
		100mm 10	/	0/10/10	

rev. 10/1/07

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>Jen</u>	nifer Royer	SCHOOL: Prince
White consequent		Department (opt.):
		DATE(S): <u>July 22-24, 2018</u>
	Excuses University Convention	
LOCATION: 44400	Indian Wells Lane, Indian Wells, CA	
ABSENCE: # Days	s 3 Sub Required: □Yes ⊠No	# of School Days Missed 0
EXPENSES REQUEST	ED: (OBTAIN RECEIPTS FOR ALL IN	NCURRED EXPENSES)
	APPROXIMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$525.00</u>	<u>100-18-100-2210-111-6360</u>
Transportation	<u>\$647.00</u> Mode <u>Air</u>	100-18-100-2210-111-6582
Rental Car	Managements .	·
Meals	<u>\$83.25</u>	100-18-100-2210-111-6582
Lodging	<u>\$350.00</u>	100-18-100-2210-111-6582
Substitutes		
TOTAL	<u>\$1605,25</u>	
The District will (or)	will not receive reimbursement from	n outside sources
Purpose of travel: To att	end the No Excuses University Conver	ntion.
<u>well as relationship buil</u>	<u>ding strategies in order to become a m</u>	icipant will be learning time management skills as ore effective leader. In addition, she will be gaining
<u>expertise in various way</u>	s to communicate with staff members	in a professional manner. Lastly, the attendee will ler to learn ways to develop the school culture that
will sustain momentum.	conaborate with quanty leaders in ord	ter to learn ways to develop the school culture that
The travel is necessary for	r the implementation of the project fundi	ing the travel.
Submitted by:	uz VA	<u>2-9</u> -18 Date
Signature		
Dan	i Sheb	<u> 2/9/18</u>
Principal/	Supervisor	2/9/18 Date
N	· I ·	X// 4//Y

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>J</u>	<u>lennifer Letts, Jennifer</u>	r Queiruga, Rebecca Bu	rnett, Brenda King, Cary Reis, Phil Tilicki,
Courtney Cummins,	Lindsay Perry, Sarah	Lortie, Trechel Gindt,	
S	SCHOOL: AMS		
_		D	epartment (opt.):
		DAT	E(S): <u>July 9-12, 2018</u>
	AVID (Advancement \) Antonio, TX	Via Individual Determin	ation) Summer Institute
		□Yes ⊠No	# of School Days Missed 0
EXPENSES REQUES	STED: (OBTAIN RECI	EIPTS FOR ALL INCUR	RED EXPENSES)
	<u>APPROXIM</u> .	ATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$7,950.00</u>		100-18-100-2210-166-6360
Transportation	on \$4,000.00	Mode <u>airline/taxi</u>	100-18-100-2210-166-6582
Rental Car			
Meals	<u>\$1,742.50</u>		100-18-100-2210-166-6582
Lodging	<u>\$3,000.00</u>		100-18-100-2210-166-6582
Substitutes			
TOTAL	<u>\$16,692.50</u>		
The District will [(or) will not 🛭 receive	e reimbursement from out	side sources.
			on) training for AVID Site Team to support the of the principal and the content area teachers.
site team will explore targets our underserv teachers; helps schoo	data to construct an a ved students (minority	ction plan for effective i and average achievers); pport 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: Signatu	A AM		2/05/18 ate

Principal/Supervisor

Date

Associate Superintendent/Superintendent

Date

rev. 9/21/05