

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 NUMBER OF STUDENTS: 48

NAME OF SCHOOL GROUP/CLUB/ENTITY: Football

STAFF ADVISOR(S)/CHAPERONES: Dustin Peace, Aaron Nymeyer, John Vallejos, Jody Bayse, Jeff Kane, Adam Rossi, Sterling Nymeyer, Andy Bayse, Jerry Necoechea

ABSENCE: # Days 2 Sub Required:  Yes  No # of School Days Missed 0

ACTIVITY / EVENT / PURPOSE OF TRAVEL: 7 on 7 Competition

DESTINATION OF TRAVEL: San Diego, CA

DATES OF TRAVEL: 6/19/15-6/20/15

ACADEMIC BENEFITS TO STUDENTS: The purpose of the travel is to compete in 7 on 7 and lineman challenges at the University of San Diego.

PROPOSED METHOD OF TRANSPORTATION:

District-owned vehicles

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

Other Bee Line Charter Bus

Are expenses paid from any of the following accounts? Auxiliary no Tax Credits yes Club Funds yes  
Parent Organization no

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

	APPROX. COST	BUDGET CODE
Registration	<u>\$ 300</u>	<u>526/850-00-100-2190-282-6892</u>
Transportation	<u>\$2,650</u>	<u>526/850-00-100-2190-282-6519</u>
Meals	<u>\$1,500</u>	<u>526/850-00-100-2190-282-6892</u>
Lodging	<u>\$2,700</u>	<u>526/850-00-100-2190-282-6892</u>
Substitutes	_____	_____

TOTAL

7,150

WILL THE DISTRICT RECEIVE REIMBURSEMENT? **no**

IF SO, SOURCE & AMOUNTS: \_\_\_\_\_

HOW ARE CHAPERONE EXPENSES PAID? **Room and food will be paid from the club account.**

COST TO EACH STUDENT \$ **400 - students will be required to fundraise**

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? **Fundraising activities for our program ads and banners will be used for kids to raise the money.**

FUNDING SOURCE(S): **club money and tax credit account**

FUNDRAISING ACTIVITIES PLANNED (If applicable):

**Selling program ads for the upcoming season, selling banners for the upcoming season**

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

4-22-15  
Date

APPROVED BY: \_\_\_\_\_  
Principal/Supervisor

4/22/15  
Date

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

5/11/15  
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: **IRHS**

ESTIMATED NUMBER OF STUDENTS: 5

NAME OF SCHOOL GROUP/CLUB/ENTITY: **IRHS HOSA**

STAFF ADVISOR(S)/CHAPERONES: **Liane Futch (volunteer)**

ABSENCE: # Days 8 Sub Required:  Yes  No # of School Days Missed 0

ACTIVITY / EVENT / PURPOSE OF TRAVEL: **HOSA National Leadership Conference/Competition**

DESTINATION OF TRAVEL: **Anaheim, CA**

DATES OF TRAVEL: **June 22-29, 2015**

ACADEMIC BENEFITS TO STUDENTS: **HOSA NLC is geared towards preparing Future Health Professionals.**

PROPOSED METHOD OF TRANSPORTATION:

District-owned vehicles

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

Other \_\_\_\_\_

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>\$110.00</u> <u>\$550.00</u>	<u>400-15-270-2190-280-6360</u> <u>526/850-00-100-1001-280-6892</u>
Transportation	<u>\$1000.00</u> _____	<u>400-15-270-2190-280-6515</u> _____
Meals	<u>\$385.00</u> <u>\$1925.00</u>	<u>400-15-270-2190-280-6582</u> <u>526/850-00-100-1001-280-6892</u>
Lodging	<u>\$1074.00</u> <u>\$1074.00</u>	<u>400-15-270-2190-280-6582</u> <u>526/850-00-100-1001-280-6892</u>
Substitutes	<u>0</u>	_____

TOTAL

\$6118.00

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

HOW ARE CHAPERONE EXPENSES PAID? n/a

COST TO EACH STUDENT \$ 909.80

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

FUNDING SOURCE(S): club funds, Pima County JTED, CTE

FUNDRAISING ACTIVITIES PLANNED (If applicable):  
snow cone sales

SUBMITTED BY:

[Signature]  
Signature

04-23-15

Date

APPROVED BY:

Natalie Burnett  
Principal/Supervisor

4/27/15

Date

[Signature]

Associate Superintendent/Superintendent

5/11/15

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 Martinez

SCHOOL: District Offices

Department (opt.): Interscholastics

DATE(S): June 1-5, 2015

ACTIVITY/EVENT: Athletic Equipment Managers Association Annual Convention

LOCATION: Indianapolis, IN

ABSENCE: # Days 5 Sub Required:  Yes  No # of School Days Missed N/A



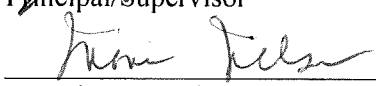
EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

<u>APPROXIMATE COST</u>		<u>BUDGET CODE/DESCRIPTION</u>
		(Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$175.00</u>	<u>001.00.620.2579.512.6360</u>
Transportation	<u>\$800.00</u> Mode <u>Air/Shuttle</u>	<u>001.00.620.2579.512.6582</u>
Rental Car	_____	_____
Meals	<u>\$380.00</u>	<u>001.00.620.2579.512.6582</u>
Lodging	<u>\$750.00</u>	<u>001.00.620.2579.512.6582</u>
Substitutes	_____	_____
TOTAL	<u>\$2105.00</u>	

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

Purpose of travel: To attend the AEMA annual convention. Will be receiving CEU's to maintain safety certification.

Outcomes and academic benefits to students and staff: To maintain safety certification to include the proper fitting of shoulder pads and helmets for football players and stay up-to-date on safety equipment and safety issues for all sports played in the district.

Submitted by:  5-4-2015  
 Signature Date  
 5-4-15  
 Principal/Supervisor Date  
 5/11/15  
 Associate Superintendent/Superintendent Date

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

EMPLOYEE(S): Matthew Haverty

SCHOOL: AHS

Department (opt.): Science

DATE(S): 6/14/15 -6/18/15

ACTIVITY/EVENT: AP (Advanced Placement) Summer Institute 2015-Environmental Science

LOCATION: Fort Worth, TX

ABSENCE: # Days 5 Sub Required:  Yes  No # of School Days Missed 0

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>\$525.00</u>		<u>103.15.100.2210.281.6360</u>
Transportation Rental Car	<u>\$525.00</u>	Mode <u>Air</u>	<u>103.15.100.2210.281.6582</u>
Meals	<u>\$78.00</u>		<u>103.15.100.2210.281.6582</u>
Lodging	<u>\$400.00</u>		<u>103.15.100.2210.281.6582</u>
Substitutes			
TOTAL	<u>\$1,528.00</u>		

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

Purpose of travel: To attend the Advanced Placement Environmental Science training for experienced teachers at Texas Christian University in Fort Worth.

Outcomes and academic benefits to students and staff: At this training, I expect to learn better ways to manage classroom time, get the most out of my students, improve student writing and retention, develop a more effective sequence for the class, and teach new and relevant information, all with the expected outcome of more students earning credit on the AP Environmental Science exam.

Submitted by:  5/6/15  
Signature Date

 5/6/15  
Principal/Supervisor Date

 5/11/15  
Associate Superintendent/Supervisor Date

rev. 9/21/05

**AMPHITHEATER PUBLIC SCHOOLS  
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EMPLOYEE(S): Bob Hehli Coral Burrell SCHOOL: Nash  
Angela Perrin Melissa Merrill Department (opt.): \_\_\_\_\_  
Monique Berry-Kelley \_\_\_\_\_ DATE(S): 7/12/15 to 7/15/15

ACTIVITY/EVENT: AVID Summer Institute

LOCATION: Sacramento, CA

ABSENCE: # Days 4 Sub Required:  Yes  No # of School Days Missed 0

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>\$3,845</u>	<u>100-15-100-2210-110-6360</u>
Transportation	<u>\$2,000</u> Mode <u>Air</u>	<u>100-15-100-2210-110-6582</u>
Rental Car	<u>\$200</u>	<u>100-15-100-2210-110-6582</u>
Meals	<u>\$850</u>	<u>100-<del>15</del>-100-2210-110-6582</u>
Lodging	<u>\$1,800</u>	<u>100-<del>15</del>-100-2210-110-6582</u>
Substitutes	_____	_____
TOTAL	<u>\$8,545</u>	

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

Purpose of travel: Teachers will attend AVID Summer Institute to learn the AVID program in an effort to better prepare students for the rigors of Middle School as well as to help students get on the college bound track.

Outcomes and academic benefits to students and staff: Increase teacher knowledge. Increase student achievement.

Submitted by: \_\_\_\_\_ 5/6/15  
 Signature \_\_\_\_\_ Date  
 \_\_\_\_\_ 5/6/15  
 Principal/Supervisor \_\_\_\_\_ Date  
 \_\_\_\_\_ 5/11/15  
 Associate Superintendent/Superintendent \_\_\_\_\_ Date

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

EMPLOYEE(S): Paul DesJarlais \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

SCHOOL: IRHS  
 Department (opt.): Science  
 DATE(S): 7/13-17/15

ACTIVITY/EVENT: AP Summer Institute - AP Physics C Mechanics course  
 LOCATION: Rice University in Houston, TX

ABSENCE: # Days 5 Sub Required:  Yes  No # of School Days Missed 0

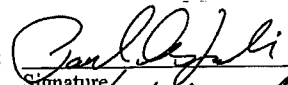
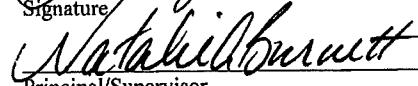
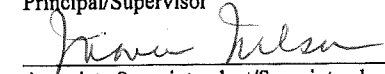
EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

<u>APPROXIMATE COST</u>		<u>BUDGET CODE/DESCRIPTION</u>
		(Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$545.00</u>	<u>530-00-100-3400-280-6360</u>
Transportation	<u>\$504.00</u> Mode <u>Air</u>	<u>530-00-100-3400-280-6582</u>
Rental Car	_____	_____
Meals	<u>\$243.00</u>	<u>530-00-100-3400-280-6582</u>
Lodging	<u>\$300.00</u>	<u>530-00-100-3400-280-6582</u>
Substitutes	_____	_____
TOTAL	<u>\$1592.00</u>	

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

Purpose of travel: Attend the AP Physics C Mechanics Summer Institute in preparation for teaching the AP Physics C Mechanics course for the upcoming school year.

Outcomes and academic benefits to students and staff: Understand and apply AP Physics C Mechanics course requirements in order to best prepare IRHS AP Physics C course students for the successful performance in the course and the AP exam.

Submitted by:  9-28-15  
 Signature Date  
 4/28/15  
 Principal/Supervisor Date  
 5/11/15  
 Associate Superintendent/Superintendent Date



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EMPLOYEE(S): Kathy Sheppard  
Cliff Wadhams  
\_\_\_\_\_

SCHOOL: District Offices  
Department (opt.): Finance  
DATE(S): October 11-15, 2015

ACTIVITY/EVENT: SunGard Public Sector 2015 Client Conference

LOCATION: Palm Springs, California

ABSENCE: # Days 5 Sub Required:  Yes  No # of School Days Missed n/a



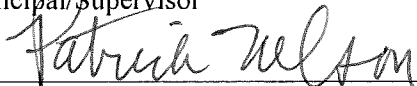
EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

	<u>APPROXIMATE COST</u>		<u>BUDGET CODE/DESCRIPTION</u>
			(Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$1,900.00</u>		<u>530-00-100-2579-520-6360</u>
Transportation	<u>\$800.00</u>	Mode <u>air</u>	<u>530-00-100-2579-520-6582</u>
Rental Car	_____		_____
Meals	<u>\$350.00</u>		<u>530-00-100-2579-520-6582</u>
Lodging	<u>\$1,600.00</u>		<u>530-00-100-2579-520-6582</u>
Substitutes	_____		_____
TOTAL	<u>\$4,650.00</u>		

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

Purpose of travel: Travel to SunGard Public Sector 2015 Client Conference

Outcomes and academic benefits to students and staff: To find the tools, strategies, and answers to Amphitheater's computer needs and to learn to maximize the use of our SunGard Public Sector products.

Submitted by:  5/4/2015  
Signature Date  
 5/4/15  
Principal/Supervisor Date  
 5-4-15  
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): Scott Little  
Steve Frost  
\_\_\_\_\_

SCHOOL: District Offices  
Department (opt.): Technology  
DATE(S): October 12-14, 2015

ACTIVITY/EVENT: Federal E-rate Program Applicant Training

LOCATION: Albuquerque, New Mexico

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

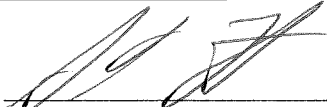
EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

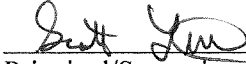
	<u>APPROXIMATE COST</u>		<u>BUDGET CODE/DESCRIPTION</u>
		(Note: Tax credit contributions are District funds and require a budget code.)	
Registration	_____		_____
Transportation	<u>\$1,000.00</u>	Mode <u>air</u>	<u>001-00-100-2579-551-6582</u>
Rental Car	_____		_____
Meals	<u>\$264.00</u>		<u>001-00-100-2579-551-6582</u>
Lodging	<u>\$650.00</u>		<u>001-00-100-2579-551-6582</u>
Substitutes	_____		_____
<b>TOTAL</b>	<b><u>\$1,914.00</u></b>		

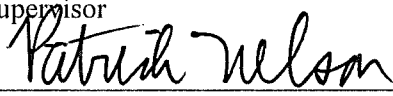
The District will  (or) will not  receive reimbursement from outside sources.

Purpose of travel: Federal E-rate Program Applicant Training

Outcomes and academic benefits to students and staff: Training on new rule changes on E-rate to maximize Federal compliance and Federal revenue.

Submitted by:  5/8/2015  
Signature Date

 5/8/15  
Principal/Supervisor Date

 5-8-15  
Associate Superintendent/Supintendent Date