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 NUMBE	ER OF STUDENTS: <u>5</u>	
NAME OF SCHOOL (	GROUP/CLUB/ENTITY: Amphi High Sc	hool Odyssey of the Mind
STAFF ADVISOR(S)/0	CHAPERONES: Carrie Bejarano-Adviso	or/Coach, Armando Soto
ABSENCE: # Days <u>6</u>	Sub Required: ⊠ Yes ☐ No # o	of School Days Missed 3
ACTIVITY / EVENT /	PURPOSE OF TRAVEL: <b>Odyssey of the</b>	Mind 2019 World Finals
DESTINATION OF TR	AVEL: Michigan State University, Lan	sing, Michigan, 48824
at the 2019 International all over the world a they have been workills, problem solving will also compete a provided by the compartment of the property of the provided of the provided of the property of the	onal Odyssey of the Mind Competition on all year. During the presentang, and working in a group to create and participate in various problems odyssey of the Mind Coordinator and scientific thinking.  OF TRANSPORTATION:	d six days at Michigan State University on. They will compete with teams from team to a complex technical problem tion they will practice public speaking a solution to a complex problem. They olving activities throughout the weeks, using higher-order thinking and
Parent Organization	—	rax creates <u>rx</u> crao r ands
EXPENSES F	REQUESTED: (OBTAIN RECEIPTS FO	R ALL INCURRED EXPENSES)
	APPROX. COST	BUDGET CODE
Registration	<u>\$4585.00</u> ———	<u>526.00.100.3400.281.6892</u>
Transportation	\$1000.00 car \$3670.45 air	<u>526.00.100.3400.281.6519</u> <u>001.00.100.1001.520.6519</u>
Meals	included in registration	

Substitutes	<u>\$375.00</u>	526.00.100.3400.281.6113
TOTAL	<u>\$10,969.50</u>	
WILL THE DISTR IF SO, SOURCE &	ICT RECEIVE REIMBURSEMENT? <u>no</u> AMOUNTS:	
HOW ARE CHAP	ERONE EXPENSES PAID? Tax Credit,	Amphi District funds
COST TO EACH S	STUDENT \$ 0	
HOW IS THIS TR PROVISIONS)? <u>ta</u>	AVEL MADE AVAILABLE TO ALL E x credit, Amphi District contribution	LIGIBLE STUDENTS (LOW FAMILY INCOME
FUNDING SOURC	CE(S): tax credit, Amphi District cont	<u>ribution</u>
FUNDRAISING A	CTIVITIES PLANNED (If applicable):	
-		
The travel is necess	ary for the implementation of the project fu	nding the travel.
SUBMITTED BY:	Signature	Alzelia Date
APPROVED BY:	JSU Ha	4/29/19
	Principal/Supervisor Mulusal Byan	Date 4/29/19
•	Associate Superintendent/Superintende	ent Date

students included in registration

\$1339.05

526.00.100.3400.281.6892

Lodging

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>CDO</u>		
ESTIMATED NUMBER OF S	STUDENTS: 31	
NAME OF SCHOOL GROUP	/CLUB/ENTITY: Odysse	y of the Mind Teams
STAFF ADVISOR(S)/CHAPPE Thomas, Leann Calvin, Le	ERONES: <u>Cymry DeBo</u> rslie Ferre, Tony Trinh	ucher, Lisa Sheldon, Lisa DaDeppo, Shauna
ABSENCE: # Days 6 Sub Ro	equired: 🗌 Yes 🛮 🖾 No	# of School Days Missed 3
ACTIVITY / EVENT / PURPO	OSE OF TRAVEL: <u>Odysse</u>	y of the Mind World Finals
DESTINATION OF TRAVEL	Michigan State Univers	ity, East Lansing, MI
DATES OF TRAVEL: <u>May 21</u> ACADEMIC BENEFITS TO S		competition in creative problem solving.
PROPOSED METHOD OF TR  District-owned vehicles Transportation approval:  Other Commercial air and  Are expenses paid from any of	_ ground transportation	xiliary Tax Credits <u>X</u> Club Funds <u>X</u>
Parent Organization X  EXPENSES REQUE	STED. (ORTAIN DECEI	PTS FOR ALL INCURRED EXPENSES)
EM BROES REQUE	APPROX. COST	BUDGET CODE
Registration	<u>\$24,890.00</u>	850-00-100-1001-282-6892 526-00-100-1001-282-6892
Transportation	<u>\$28,000.00</u> ———	850-00-410-2710-282-6519 526-00-410-2710-282-6519
Meals	<u>0</u> ———	
Lodging	<u>0</u>	
Substitutes	<u>0</u>	

WILL THE DISTRICT RECEIVE R IF SO, SOURCE & AMOUNTS:	EEIMBURSEMENT? <u>No</u>	
HOW ARE CHAPERONE EXPEN	SES PAID? <b>Chaperones will e</b>	ach contribute \$400 and the rest is
COST TO EACH STUDENT \$ 400	.00 which can be paid as tax o	credit or donation to the club
HOW IS THIS TRAVEL MADE A PROVISIONS)? fundraising is us		STUDENTS (LOW FAMILY INCOME
FUNDING SOURCE(S):		
FUNDRAISING ACTIVITIES PLANA Appeals to various Rotary clubs Grant application - Amphitheate Letter writing campaign and Tax	s and other charitable organiz er Foundation	<u>ations</u>
The travel is necessary for the implement	ntation of the project funding the trave	el,
SUBMITTED BY: Group I	Detoral	4/18/19 Date
APPROVED BY: TBull Principal/Supervi	Byan	4.18.19 Date U2918
Associate Supe	rintendent/Superintendent	Date

Associate Superintendent/Superintendent

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: <b><u>Donaldson</u></b>				
ESTIMATED NUMBER OF S	STUDENTS: 6			
NAME OF SCHOOL GROUP	/CLUB/ENTITY: <b>Donal</b>	dson Odyssey of the Mind Club		
STAFF ADVISOR(S)/CHAPE	STAFF ADVISOR(S)/CHAPERONES: Megan Etter / Maria Gallegos			
ABSENCE: # Days 5 Sub R	equired: 🗌 Yes 🛮 🛛 No	# of School Days Missed 3		
ACTIVITY / EVENT / PURPO	OSE OF TRAVEL: <b>Odys</b> :	sey of the Mind World Travel		
DESTINATION OF TRAVEL	: <u>Michigan State Unive</u>	rsity, Lansing, MI		
DATES OF TRAVEL: <u>May 2</u> ACADEMIC BENEFITS TO S		derstanding, advanced creative problem solving		
PROPOSED METHOD OF THE District-owned vehicles Transportation approval:  Other <u>American Airlines</u>	RANSPORTATION:			
Are expenses paid from any of Parent Organization <u>x</u>	the following accounts? A	Auxiliary <u>x</u> Tax Credits <u>x</u> Club Funds <u>x</u>		
EXPENSES REQU	ESTED: (OBTAIN REC	EIPTS FOR ALL INCURRED EXPENSES)		
	APPROX. COST	BUDGET CODE		
Registration	\$2,297.94 \$4,807.06	<u>001-00-100-1001-520-6892</u> <u>526-00-100-1001-106-6892</u>		
Transportation	\$2,202.06 \$1,320.03	<u>001-00-100-1001-520-6519</u> <u>526-00-100-1001-106-6519</u>		
Meals	\$350.00	525-00-100-1001-106-6892		
Lodging				
Substitutes				

\$10,977.09

**TOTAL** 

WILL THE DISTRICT RECEIVE REIMBURSEMENT? No IF SO, SOURCE & AMOUNTS:	
HOW ARE CHAPERONE EXPENSES PAID? <b>Donations</b>	
COST TO EACH STUDENT \$ 400.00	
HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUD PROVISIONS)? <b>Donation Drive</b>	PENTS (LOW FAMILY INCOME
FUNDING SOURCE(S): Tax Credit Drive, PTO Fundraising	
FUNDRAISING ACTIVITIES PLANNED (If applicable): Tax Credit Drive, PTO Go Fund Me	
The travel is necessary for the implementation of the project funding the travel.	
SUBMITTED BY: Signature	1/20/19 Date
APPROVED BY:  Principal/Supervisor	4/29/19 Date
Muhael Byan- Associate Superintendent/Superintendent	4/29/B

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: 10				
NAME OF SCHOOL	NAME OF SCHOOL GROUP/CLUB/ENTITY: Canyon Cagers (Girls Basketball)			
STAFF ADVISOR(S)	CHAPERONES: Coache	es Kent Senze	ee, Clifton Leake, Devina Montierth	
ABSENCE: # Days 5	Sub Required: Yes	⊠ No	# of School Days Missed 0	
ACTIVITY / EVENT	PURPOSE OF TRAVEL	.: <u>Summer Ba</u>	sketball Tournament	
DESTINATION OF T	RAVEL: <b>San Diego, CA</b>	7	•	
DATES OF TRAVEL: June 19 - June 23, 2019 ACADEMIC BENEFITS TO STUDENTS: Student athletes will bond as a team and learn how to get along with others. They will learn leadership and sportsmanship qualities during their competition with other teams. They will also learn how to budget their own money.				
PROPOSED METHOD OF TRANSPORTATION:  District-owned vehicles  Transportation approval:  Other Coaches and Chaperones will use their personal vehicles				
Are expenses paid from any of the following accounts? Auxiliary <u>yes</u> Tax Credits <u>yes</u> Club Funds <u>yes</u> Parent Organization <u>no</u>				
EXPENSES	REQUESTED: (OBTAI	N RECEIPTS	S FOR ALL INCURRED EXPENSES)	
	APPROX. COST	Γ	BUDGET CODE	
Registration	<u>\$495.00</u>		<u>526/850-00-100-1001-282-6892</u>	
Transportation	<u>\$0.00</u>	•	<u>n/a</u>	
Meals	self pay		<u>n/a</u>	
Lodging	<u>\$2,900.00</u>		<u>526/850-00-100-1001-282-6892</u>	
Substitutes	\$0.00		n/a	

Principal/Supervisor

Associate Superintendent/Superintendent

SUBMITTED BY: \_

APPROVED BY:

WILL THE DISTRICT RECEIVE REIMBURSEMENT? <b>no</b> IF SO, SOURCE & AMOUNTS:
HOW ARE CHAPERONE EXPENSES PAID? no chaperone costs
COST TO EACH STUDENT \$ 120 for food and pocket money
HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? scholarships, fundraising opportunities
FUNDING SOURCE(S): Canyon Cagers
FUNDRAISING ACTIVITIES PLANNED (If applicable): none
$\mathcal{N}$

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	SCH	OOL: <u>District Offices</u>	
		D	epartment (opt.): Interscholastic	
-		DA	ΓΕ(S): <u>June 3-6, 2019</u>	
ACTIVITY/EVENT	Athletic Equipment	Managers Association An	nual Convention	
LOCATION: <u>Ind</u>	ianapolis, IN			
ABSENCE: # I	Days 4 Sub Requir	ed: □Yes ⊠No	# of School Days Missed $ \underline{0} $	
EXPENSES REQUE	STED: (OBTAIN RE	ECEIPTS FOR ALL INCUR	RED EXPENSES)	
	<u>APPROX</u>	IMATE COST	BUDGET CODE/DESCRIPTION  (Note: Tax credit contributions are District funds and require a budget code.)	
Registration	<u>o</u>			
Transportati	on <u>\$730.00</u>	Mode Air/Shuttle	001.00.620.2579.512.6582	
Rental Car	<u>o</u>			
Meals	<u>\$161.00</u>		001.00.620.2579.512.6582	
Lodging	<u>\$800.00</u>		001.00.620.2579.512.6582	
Substitutes	<u>0</u>			
TOTAL	<u>\$1691.00</u>			
The District will 🔲	(or) will not 🛛 recei	ive reimbursement from out:	side sources.	
Purpose of travel: <u>To</u>	attend the A.E.M.A	. Annual Convention. Will	be receiving CEU's to maintain safety	
	elmets for football p		afety certification to include the proper fitting of on safety equipment and safety issues for all	
The travel is necessar	y for the implementat	ion of the project funding th	e travel.	
Submitted by:	iturg /		4-30-19 Date	
	All SIST		4/30/19	
Princ	Principal/Supervisor Date			
Assoc	ciate Superintendent/S	Superintendent	Date 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): Ro	bin Resley	SCHOOL: Coronado K-8
	programme (parametric de la constitución de la cons	Department (opt.): Science
Extraprinary	designation design	DATE(S): <u>June 16 – 19, 2019</u>
ACTIVITY/EVENT: P	roject Lead the Way Core Train	ing – Energy and the Environment
LOCATION: <u>El Se</u>	gundo, CA	
ABSENCE: # Day	√s <u>4</u> Sub Required: □Yes ⊠	No # of School Days Missed <b>0</b>
EXPENSES REQUEST	TED: (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>\$ 750.00</u>	<u>140-19-100-2210-515-6360</u>
Transportation	\$ 300.00 Mode a	<u>ir</u> <u>140-19-100-2210-515-6582</u>
Rental Car		
Meals	<u>\$ 118.00</u>	<u>140-19-100-2210-515-6582</u>
Lodging	<u>\$ 570.06</u>	<u>140-19-100-2210-515-6582</u>
Substitutes		
TOTAL	<u>\$1,738.06</u>	
The District will (or)	) will not 🛛 receive reimburseme	ent from outside sources.
Purpose of travel: To at	tend Core Training – Energy an	d the Environment
Outcomes and academic engage, inspire, and em		prepare teachers with the skills and tools they need to
The travel is necessary for	or the implementation of the projec	t funding the travel.
Submitted by: Signature	e	Date
M	/Supervisor  Byase  e Superintendent/Superintendent	Date U2919 Date