



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

**DATE OF MEETING:**      **April 14, 2026**

**TITLE:**            **Approval of Out of State Travel**

**BACKGROUND:**

**STAFF**

Beth Lake requests permission to attend National School Public Relations Association National Seminar on July 17-23, 2026 in New Orleans, Louisiana. Approximate cost of travel is \$3,775.00, and will be paid using Maintenance and Operations funds. No school days will be missed, and no substitutes are required.

Mike Gemma requests permission to attend AVID Summer Institute 2026 on June 28-July 1, 2026 in San Diego, California. Approximate cost of travel is \$3,040, and will be paid using Maintenance and Operations funds. No school days will be missed, and no substitutes are required.

Kim Moran requests permission to attend AVID Summer Institute 2026 on June 28-July 1, 2026 in San Diego, California. Approximate cost of travel is \$3,040, and will be paid using Title II funds. No school days will be missed, and no substitutes are required.

**STUDENTS**

Lisa DaDeppo, Scott Lassiter, and Karissa Weiler request permission to take 14 CDO Odyssey of the Mind students to Odyssey of the Mind World Finals Competition on May 26-31, 2026 in Ames, Iowa. Approximate cost of travel is \$27,155.68, and will be paid using Student Activities and Tax Credit funds.

Colin Cordell, Patricia Patchin, Melissa Crown, Biancha Infante, Megan Davenport, and Christina Garcia Seminario request permission to take 20 Innovation Odyssey of the Mind students to Odyssey of the Mind World Finals Competition on May 26-31, 2026 in Ames, Iowa. Approximate cost of travel is \$41,023.90, and will be paid using Student Activities and Tax Credit funds.

Harriot Demetriou and Jennifer Iadevaia request permission to take 7 Donaldson students to Odyssey of the Mind World Finals Competition on May 26-31, 2026 in Ames, Iowa. Approximate cost of travel is \$21,165.00 and will be paid using Student Activities and Tax Credit funds.

Heidy Quill, Ann Meulemans, Nina Brown, and Joanne Carlson request permission to take 19 Painted Sky students to the Odyssey of the Mind World Finals in Ames, IA May 27-31, 2026. Approximate cost of travel is \$37,903.64 and is being paid using tax credit and Auxiliary funds.

<b>BUDGET CODE KEY</b>		
001.00.100.2579.6360.503.0000	M & O	Training Non-Instructional, Employee Training, Communications
001.00.100.2579.6582.503.0000	M & O	Training Non-Instructional, Employee Travel, Communications
001.00.100.2310.6360.502.0000	M & O	Governing Board, Employee Training, Governing Board
001.00.100.2310.6582.502.0000	M & O	Governing Board, Employee Travel, Governing Board

140.26.100.2579.6360.510.0000	Title II	Training Non-Instructional, Employee Training, Office of Learning and Instruction
140.26.100.2579.6582.510.0000	Title II	Training Non-Instructional, Employee Travel, Office of Learning and Instruction
850.00.610.1001.6892.282.0000	Student Activities	Classroom Instruction, Student Expenses, CDO
526.00.610.1001.6892.282.0000	Tax Credit	Classroom Instruction, Student Expenses, CDO
850.00.610.2190.6892.282.0000	Student Activities	Other Student Support Services, Student Expenses, CDO
526.00.410.2710.6519.282.0000	Tax Credit	Student Transportation, Student Travel, CDO
526.00.610.2190.6892.282.0000	Tax Credit	Other Student Support Services, Student Expenses, CDO
850.00.610.1001.6892.119.0000	Student Activities	Classroom Instruction, Student Expenses, Innovation
850.00.610.2190.6892.119.0000	Student Activities	Other Student Support Services, Student Expenses, Innovation
526.00.410.2710.6519.119.0000	Tax Credit	Student Transportation, Student Travel, Innovation
526.00.610.2190.6892.106.0000	Tax Credit	Other Student Support Services, Student Expenses, Donaldson
525.00.610.2190.6892.114.0000	Auxiliary	Other Student Support Services, Student Expenses, Painted Sky
526.00.610.2190.6892.114.0000	Tax Credit	Other Student Support Services, Student Expenses, Painted Sky

**RECOMMENDATION:**

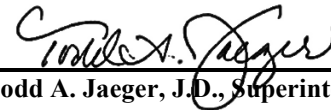
It is the recommendation of the administration that the above travel be approved.

**INITIATED BY:**



**Matthew Munger**  
Associate Superintendent for Secondary Education

**Date: April 13, 2026**



**Todd A. Jaeger, J.D., Superintendent**

**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): Beth Lake \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

SCHOOL: District Office  
 Department (opt.): Communications Department  
 DATE(S): 07/17/26-07/23/26

ACTIVITY/EVENT: National School Public Relations Association National Seminar

LOCATION: New Orleans, LA

ABSENCE: # Days 6 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>
Registration	<u>\$1140</u>		<u>001.00.100.2579.6360.503.0000</u>
Transportation	<u>\$1000.00</u>	Mode <u>Air</u>	<u>001.00.100.2579.6582.503.0000</u>
Rental Car	_____		
Meals	<u>\$350.00</u>		<u>001.00.100.2579.6582.503.0000</u>
Lodging	<u>\$1250.00</u>		<u>001.00.100.2579.6582.503.0000</u>
TOTAL	<u>\$3775.00</u>		

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

\* PO must be submitted and approved *prior* to travel to qualify for reimbursement.

Purpose of travel: Attend the National School Public Relations Association 2026 National Seminar

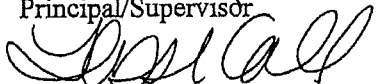
Outcomes and academic benefits to students and staff: Networking with other family engagement/communications professionals as well as opportunities to learn about current family engagement and communication strategies needed to advocate for our schools.

Identify which characteristics of the Portrait of Graduate are specifically related to this request.

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Academic Content         | <input type="checkbox"/> Caring                     | <input type="checkbox"/> Citizenship                  |
| <input checked="" type="checkbox"/> Collaboration | <input checked="" type="checkbox"/> Communication   | <input checked="" type="checkbox"/> Creative Thinking |
| <input type="checkbox"/> Critical Thinking        | <input checked="" type="checkbox"/> Problem-Solving |   |

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

Submitted by:  3/10/26  
 Signature Date

\_\_\_\_\_  
 Principal/Supervisor Date  
  
 Associate Superintendent/Supervisor Date 03.20.26

**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): Mike Gemma \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

SCHOOL: \_\_\_\_\_  
 Department (opt.): Governing Board  
 DATE(S): June 28-July 1, 2026

ACTIVITY/EVENT: AVID 2026 Summer Institute

LOCATION: San Diego, 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>
		<small>(Note: Tax credit contributions are District funds and require a budget code.)</small>	
Registration	<u>\$1099</u>		<u>001.00.100.2310.6360.502.0000</u>
Transportation	<u>\$ 625</u>	Mode <u>air</u>	<u>001.00.100.2310.6582.502.0000</u>
Meals	<u>\$ 266</u>		<u>001.00.100.2310.6582.502.0000</u>
Lodging	<u>\$1050</u>		<u>001.00.100.2310.6582.502.0000</u>
 TOTAL	 <u>\$3,040</u>		

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

\* PO must be submitted and approved *prior* to travel to qualify for reimbursement.

Purpose of travel: To participate in AVID Summer Institute Professional Development

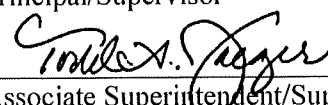
Outcomes and academic benefits to students and staff: Participants will strengthen their understanding of AVID implementation on their campus, and learn valuable best practices strategies to ensure rigorous implementation toward AVID school side.

Identify which characteristics of the Portrait of Graduate are specifically related to this request.

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Caring                     | <input type="checkbox"/> Citizenship                  | <input checked="" type="checkbox"/> Collaboration     |
| <input type="checkbox"/> Communication              | <input checked="" type="checkbox"/> Creative Thinking | <input checked="" type="checkbox"/> Critical Thinking |
| <input checked="" type="checkbox"/> Problem-Solving | <input checked="" type="checkbox"/> Scholarship       |   |

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

Submitted by: \_\_\_\_\_ Date \_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Principal/Supervisor Date  
  
 Associate Superintendent/Superintendent 3/27/26  
 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): Kim Moran \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

SCHOOL: \_\_\_\_\_  
 Department (opt.): Student Services  
 DATE(S): June 28-July 1, 2026

ACTIVITY/EVENT: AVID 2026 Summer Institute

LOCATION: San Diego, 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>\$1099</u>	<u>140.26.100.2579.6360.510.0000</u>
Transportation	<u>\$ 625</u> Mode <u>air</u>	<u>140.26.100.2579.6582.510.0000</u>
Meals	<u>\$ 266</u>	<u>140.26.100.2579.6582.510.0000</u>
Lodging	<u>\$1050</u>	<u>140.26.100.2579.6582.510.0000</u>
 TOTAL	 <u>\$3,040</u>	

The District will  (or) will not  receive reimbursement from outside sources.  
 \* PO must be submitted and approved *prior* to travel to qualify for reimbursement.

Purpose of travel: To participate in AVID Summer Institute Professional Development

Outcomes and academic benefits to students and staff: Participants will strengthen their understanding of AVID implementation on their campus, and learn valuable best practices strategies to ensure rigorous implementation toward AVID school side.

Identify which characteristics of the Portrait of Graduate are specifically related to this request.

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Caring                     | <input type="checkbox"/> Citizenship                  | <input checked="" type="checkbox"/> Collaboration     |
| <input type="checkbox"/> Communication              | <input checked="" type="checkbox"/> Creative Thinking | <input checked="" type="checkbox"/> Critical Thinking |
| <input checked="" type="checkbox"/> Problem-Solving | <input checked="" type="checkbox"/> Scholarship       |   |

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

Submitted by: Mary Thatcher \_\_\_\_\_ 3/27/26  
 Signature Date

Principal/Supervisor	Date
<u>[Signature]</u>	<u>3/30/26</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: Canyon del Oro High School

ESTIMATED NUMBER OF STUDENTS: 14

NAME OF SCHOOL GROUP/CLUB/ENTITY: Odyssey of the Mind

STAFF ADVISOR(S)/CHAPERONES: Lisa DaDeppo, Scott Lassiter, Karissa Weiler

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

ACTIVITY / EVENT / PURPOSE OF TRAVEL: World Finals Competition for Odyssey of the Mind

DESTINATION OF TRAVEL: Iowa State University Ames, Iowa

DATES OF TRAVEL: 5/26/26-5/31/26

ACADEMIC BENEFITS TO STUDENTS: Students engage in creative problem solving that incorporates physics, fine arts, literature, mechanics, construction, communication, collaboration, and presentation skills. Many of the skills learned and used are transferable to other domains and all are aligned with the portrait of a graduate.

Identify which characteristics of the Portrait of Graduate are specifically related to this event.

<input checked="" type="checkbox"/> Academic Content	<input checked="" type="checkbox"/> Caring	<input type="checkbox"/> Citizenship
<input checked="" type="checkbox"/> Collaboration	<input checked="" type="checkbox"/> Communication	<input checked="" type="checkbox"/> Creative Thinking
<input checked="" type="checkbox"/> Critical Thinking	<input checked="" type="checkbox"/> Problem-Solving	

PROPOSED METHOD OF TRANSPORTATION:

District-owned vehicles

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

Other Domestic airline travel and rental vans

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>\$13,770</u>	<u>850.00.610.1001.6892.282.0000</u> <u>526.00.610.1001.6892.282.0000</u>
Transportation	<u>\$10,455.68 Flight</u> <u>\$2,280 Rental Vans</u>	<u>850.00.610.2190.6892.282.0000</u> <u>526.00.410.2710.6519.282.0000</u>
Meals	<u>Included in Registration</u> <u>\$650 for 3 non included meals and snacks</u>	<u>850.00.610.2190.6892.282.0000</u>
Lodging	<u>Included in Registration</u> <u>Included in Registration</u>	<u>850.00.610.2190.6892.282.0000</u> <u>526.00.610.2190.6892.282.0000</u>
Substitutes	N/A	_____
<b>TOTAL</b>	<b><u>\$27,155.68</u></b>	

WILL THE DISTRICT RECEIVE REIMBURSEMENT? No

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

\* PO must be submitted and approved *prior* to travel to qualify for reimbursement.

HOW ARE CHAPERONE EXPENSES PAID? Through self pay and club money

COST TO EACH STUDENT \$ \$1597.39

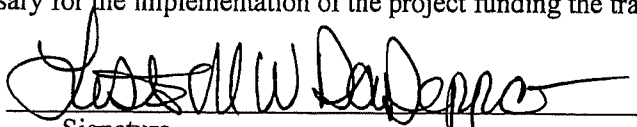
HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? Tax credit, club fundraising

FUNDING SOURCE(S): Tax credit, club, request to Amphi foundation, request to site council

FUNDRAISING ACTIVITIES PLANNED (If applicable):  
Spontaneous Workshop held for all Southern AZ OM teams

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

SUBMITTED BY:


  
Signature

3/16/26  
Date

APPROVED BY:

  
Principal/Supervisor

3/16/26  
Date

  
Associate Superintendent/Supervisor

3/25/2026  
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: Innovation Academy

ESTIMATED NUMBER OF STUDENTS: 20 Blake Davenport, Livia Fendrick, Milana Jackson, Caroline Barrett, Drew Garcia Seminario, Kathryn Parker, Wyatt Michaelsen, Aezandra Crown, Kansas Mellen, Eleanor Hollen, Noelle Hobbins, Antonio Infante, Josephine Fendrick, Sophia Callienes, Dominic Lococo, Onesimus Lopez, Mason Rehm, Camille Rhoads, Mackenzie Cordell, Zara Laing

NAME OF SCHOOL GROUP/CLUB/ENTITY: Innovation Academy Odyssey of the Mind

STAFF ADVISOR(S)/CHAPERONES: Colin Cordell, Patricia Patchin, Melissa Crown, Biancha Infante, Megan Davenport, Christina Garcia Seminario

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

ACTIVITY / EVENT / PURPOSE OF TRAVEL: Odyssey of the Mind Worlds

DESTINATION OF TRAVEL: Ames, IA

DATES OF TRAVEL: May 25, 2026 – May 31, 2026

ACADEMIC BENEFITS TO STUDENTS: High level of academic competition

Identify which characteristics of the Portrait of Graduate are specifically related to this event.

- |   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Academic Content  | <input type="checkbox"/> Caring                     | <input type="checkbox"/> Citizenship                  |
| <input checked="" type="checkbox"/> Collaboration     | <input checked="" type="checkbox"/> Communication   | <input checked="" type="checkbox"/> Creative Thinking |
| <input checked="" type="checkbox"/> Critical Thinking | <input checked="" type="checkbox"/> Problem-Solving |   |

PROPOSED METHOD OF TRANSPORTATION:

District-owned vehicles

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

Other American Airlines and rental vehicles for ground transportation

Are expenses paid from any of the following accounts? Auxiliary \_\_\_\_\_ Tax Credits Yes Club Funds Yes  
Parent Organization Yes

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

	APPROX. COST	BUDGET CODE
Registration	<u>\$16,200.00(students)</u>	<u>850.00.610.1001.6892.119.0000</u>
	<u>\$4,860.00 (coaches)</u>	<u>850.00.610.2190.6892.119.0000</u>
Air Transportation	<u>\$12,978.60 (students)</u>	<u>526.00.410.2710.6519.119.0000</u>
	<u>\$4,893.30 (coaches)</u>	<u>850.00.610.2190.6892.119.0000</u>
Ground Transportation	<u>\$2,092.00</u>	<u>526.00.410.2710.6519.119.0000</u>
	_____	_____
Meals	_____	_____
	_____	_____
Lodging	_____	_____
	_____	_____
Substitutes	_____	_____
<b>TOTAL</b>	<b><u>\$41,023.90</u></b>	

WILL THE DISTRICT RECEIVE REIMBURSEMENT?

IF SO, SOURCE & AMOUNTS:

\* PO must be submitted and approved *prior* to travel to qualify for reimbursement.

HOW ARE CHAPERONE EXPENSES PAID? **Club Funds**

COST TO EACH STUDENT \$ **600.00**

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? **TC scholarships available**

FUNDING SOURCE(S): **TC contributions, club funds, district contributions, Amphi Foundation contribution, fundraising**

FUNDRAISING ACTIVITIES PLANNED (If applicable):

**Jim Click & Ice Cream Night**

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

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

Signature

3.30.20

Date

APPROVED BY: \_\_\_\_\_

Principal/Supervisor

3.30.20

Date

Associate Superintendent/Superintendent

3/30/20

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: Donaldson Elementary

ESTIMATED NUMBER OF STUDENTS: 7

NAME OF SCHOOL GROUP/CLUB/ENTITY: Odyssey of the Mind

STAFF ADVISOR(S)/CHAPERONES: Harriet Demetriou and Jennifer Iadevaia

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

ACTIVITY / EVENT / PURPOSE OF TRAVEL: OM World Finals

DESTINATION OF TRAVEL: Ames, Iowa

DATES OF TRAVEL: 5.26.26-5.31.26

ACADEMIC BENEFITS TO STUDENTS: Critical Thinking and Collaboration

Identify which characteristics of the Portrait of Graduate are specifically related to this event.

- |   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Academic Content  | <input checked="" type="checkbox"/> Caring          | <input checked="" type="checkbox"/> Citizenship       |
| <input checked="" type="checkbox"/> Collaboration     | <input checked="" type="checkbox"/> Communication   | <input checked="" type="checkbox"/> Creative Thinking |
| <input checked="" type="checkbox"/> Critical Thinking | <input checked="" type="checkbox"/> Problem-Solving |   |

PROPOSED METHOD OF TRANSPORTATION:

District-owned vehicles

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

Other Air Flight and shuttle

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/ Lodging	<u>\$11,340.00</u>	<u>526.00.610.2190.6892.106.0000</u> <u>530.00.610.2190.6892.106.0000</u>
Transportation	<u>\$9,825.00</u>	<u>526.00.610.2190.6892.106.0000</u> <u>530.00.610.2190.6892.106.0000</u>
Meals	_____	_____
Substitutes	_____	_____
<b>TOTAL</b>	<b><u>\$21,165.00</u></b>	

WILL THE DISTRICT RECEIVE REIMBURSEMENT? No

IF SO, SOURCE & AMOUNTS: N/A

\* PO must be submitted and approved *prior* to travel to qualify for reimbursement.

HOW ARE CHAPERONE EXPENSES PAID? Donations, TC,

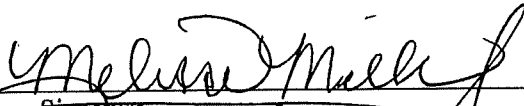
COST TO EACH STUDENT \$ \$1,850.00

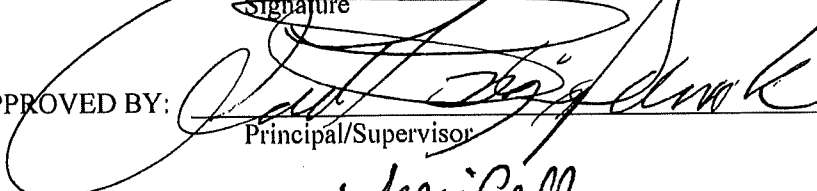
HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? Amphi Foundation Donations

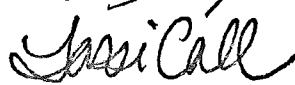
FUNDING SOURCE(S): Donations, TC, Gifts & Donations, PTO, OM, SA.

FUNDRAISING ACTIVITIES PLANNED (If applicable):

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

SUBMITTED BY:  4-10-26  
Signature Date

APPROVED BY:  4-10-26  
Principal/Supervisor Date

 4-13-26  
Associate Superintendent/Supintendent 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: Painted Sky Elementary

ESTIMATED NUMBER OF STUDENTS: 19

NAME OF SCHOOL GROUP/CLUB/ENTITY: Odyssey of the Mind

STAFF ADVISOR(S)/CHAPERONES: Heidy Quill, Ann Meulemans, Nina Brown, Joanne Carlson

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

ACTIVITY / EVENT / PURPOSE OF TRAVEL: Odyssey of the Mind World Competition

DESTINATION OF TRAVEL: University Of Iowa - Ames, IA

DATES OF TRAVEL: 5/27/26-5/31/26

ACADEMIC BENEFITS TO STUDENTS: Students will be competing to solve a problem.

They will use effective communication, creative thinking and critical thinking

in order to solve the problem.

Identify which characteristics of the Portrait of Graduate are specifically related to this event.

Academic Content  
 Collaboration  
 Critical Thinking

Caring  
 Communication  
 Problem-Solving

Citizenship  
 Creative Thinking

PROPOSED METHOD OF TRANSPORTATION:

District-owned vehicles Transportation approval: \_\_\_\_\_

Other Air Travel & Car Rental

Are expenses paid from any of the following accounts? Auxiliary Yes Tax Credits Yes Club Funds Yes  
Parent Organization Yes

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

	APPROX. COST	BUDGET CODE
Registration	\$17,825.00***	525.00.610.2910.6892.114.0000
		526.00.610.2910.6892.114.0000
		530.00.610.2910.6892.114.0000
		001.00.610.2190.6892.114.0000
Transportation	\$18,330.77/Air	526/525.00.610.2190.6892.114.0000
	\$1,747.87/Car Rental & Prop Delivery	526/525.00.410.2710.6519.114.0000
		530.00.410.2710.6519.114.0000
		001.00.610.2190.6892.114.0000

\*\* Food and Lodging included in Registration Fee

**TOTAL** \$37,903.64

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

\* PO must be submitted and approved *prior* to travel to qualify for reimbursement.

HOW ARE CHAPERONE EXPENSES PAID? Fundraising, PTO, Gifts & Donations, Tax Credit

COST TO EACH STUDENT \$ \$1,652.56

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? Tax Credit, Fundraising, PTO, Gifts & Donations

FUNDING SOURCE(S): Tax Credit, Fundraising, PTO Gifts & Donations

FUNDRAISING ACTIVITIES PLANNED (If applicable):

Still discussing options

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

SUBMITTED BY: [Signature] 4/17/26  
 Signature Date

APPROVED BY: [Signature] 4/17/26  
 Principal/Supervisor Date

[Signature] 4/17/26  
 Associate Superintendent/Superintendent Date