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): Pan	nela Fenstamaker	Linda Haller	SCHOOL: District Offices
			Department (opt.): Student Services
			DATE(S): <u>May 5-9, 2012</u>
ACTIVITY/EVENT: <u>33</u>	^{^d} Annual LRP Inst	<u>itute on Legal Iss</u>	ues of Educating Individuals with Disabilities
LOCATION: <u>San Ai</u>	ntonio, Texas		
ABSENCE: # Days	s <u>3</u> Sub Required	: □Yes ⊠No	# of Sehool Days Missed 3
EXPENSES REQUEST	ED: (OBTAIN REC	EIPTS FOR ALL	INCURRED EXPENSES)
	<u>APPROXIM</u>	ATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	2500.00		001.00.200.2579.540.6360
Transportation	816.00	Mode <u>AIR</u>	001.00.200.2579.540.6582
Rental Car			
Meals	490.00		001.00.200.2579.540.6582
Lodging	<u>1907.50</u>		$\underline{001.00.200.2579.540.6582}$
Substitutes	<u>0</u>		
TOTAL	<u>5713.50</u>		
The District will [] (or) will not ⊠ receiv	e reimbursement f	rom outside sources.
Purpose of travel: <u>Atter</u> <u>Disabilities</u>	nd the 33 nd Annual I	LRP's National In	stitute on Legal Issues of Education Individuals with
Outcomes and academic	benefits to students	and staff: Update	special education legal requirements information
,			
Submitted by: , Signatur		7.711	9/21/11 Date
*	- achy Cit.	Lune	9/2/11
Principa	d/Supervisor	2) /	Date
	Patrick	nelsm	10-18-11
Associa	te Superintendent/Su	perintendent	Date

STAFF TRAVEL/CONFERENCE REQUEST

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

EMPLOYEE(S):	<u>Joseph</u>	Paddock	SCHO	OOL: District Offices
			De	partment (opt.): <u>Interscholastics</u>
			DATI	E(S): <u>12/10 - 12/13/2011</u>
ACTIVITY/EVEN			tors Conference	
LOCATION: <u>I</u>	<u>ndianapo</u>	<u>lis, IN</u>		
ABSENCE: #	[‡] Days 2	Sub Required:	∐Yes ⊠No	# of School Days Missed 2
EXPENSES REQU	JESTED:	(OBTAIN RECE	IPTS FOR ALL INCURR	RED EXPENSES)
		<u>APPROXIM</u>	ATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registratio	on <u>4</u> 1	10.00		001-00-620-2579-512-6360
Transport	ation <u>6</u>	50.00	Mode Flight & Taxi	001-00-620-2579-512-6582
Rental Car	_			
Meals	14	<u> 18.00</u>		001-00-620-2579-512-6582
Lodging	<u>53</u>	33.52		001-00-620-2579-512-6582
Substitutes	_			
TOTAL	<u>17</u>	741.52		
The District will	or) wi	ill not 🛛 receive	reimbursement from outs	side sources.
Purpose of travel:	To attend	d the National At	hletic Directors Confere	nce and become updated on current practices.
Outcomes and acad safety, and high so			•	o-to-date methods/policies for athletics, budget,
Submitted by.	gnatare	P.P.C	CK	10/11/11 Date
Pri	ncipal/Su	pervisor		Date
$\overline{\Delta}$ e	sociate Si	Januarintendent/Sup	WWYU-	<u>//)-/ /-/!</u> Date
7 10				

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):	Robert Stoner	Betty Kave Atwell	SCHOOL: Keeling
	Emily Beutel	Mary Brown	Department (opt.):
	Pat Corcoran	Megan Gardner	DATE(S): November 6-9, 2011
	Brett Daglio	Kim McDole	
ACTIVITY/EVE	NT: <u>No Excuses U</u>	niversity Conference	
LOCATION:	Schaumburg, IL		C
ABSENCE:	# Days 3 Sub R	equired: XYes No	# of School Days Missed 3
EXPENSES REQ	UESTED: (OBTA	IN RECEIPTS FOR ALL INC	CURRED EXPENSES)
	APP	ROXIMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registrati	ion <u>3225.81</u>		100 12 100 2210 109 6360
Transpor	tation <u>4207.77</u>	Mode <u>Airplane</u>	100 12 100 2210 109 6582
Rental Ca	ar <u>500.00</u>		100 12 100 2210 109 6582
Meals	1445.50		100 12 100 2210 109 6582
Lodging	<u>1909.60</u>		<u>100 12 100 2210 109 6582</u>
Substitute	es <u>2100.00</u>		100 12 100 2210 109 6113
TOTAL	13388.68		
The District will [☐ (or) will not 🏻	receive reimbursement from	outside sources.
frame our being	a No Excuses Univ	ersity. Particular focus will	be on implementation of strategies important for . (Both of these directly relate to our ASIP.)
effective implem	entation of the six		pertoire of instructional strategies along with more It in more effective education and greater academic
growth for stude Submitted by:	80109/rs		9- 28 -11
-	ignature		Date
	80100 tc		9-29-11
p	rincipal/Supervisor	i Tuelson	Date 10-18-11
Ā	1000	ident/Superintendent	Date 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: <u>AMS</u>				
ESTIMATED NUMBER OF S	TUDENTS: 40			
NAME OF SCHOOL GROUP.	NAME OF SCHOOL GROUP/CLUB/ENTITY: Project Catalina			
STAFF ADVISOR(S)/CHAPE Gordon	RONES: Debbie Melde, Davi	d Torres, Teresa Eckley, Ron Pierce, Lisa		
ABSENCE: # Days 4 Sub Ro	equired: 🛛 Yes 🔲 No	# of School Days Missed 4		
ACTIVITY / EVENT / PURPO	OSE OF TRAVEL: Trip to Cata	lina Island Marine Institute		
DESTINATION OF TRAVEL	: Catalina Island, California			
DATES OF TRAVEL: Mar. 6-9, 2012 ACADEMIC BENEFITS TO STUDENTS: Extension of science curriculum. Topics include marine biology, oceanography and ecology.				
PROPOSED METHOD OF TR ☐ District-owned vehicles Transportation approval: ☐ Other <u>Charter Bus</u>				
Are expenses paid from any of Parent Organization	the following accounts? Auxiliar	y <u>x</u> Tax Credits <u>x</u> Club Funds		
EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)				
	APPROX. COST	BUDGET CODE		
Registration	<u>10000</u>	525/526-00-100-1001-166-6892		

Transportation

Meals

Lodging

Substitutes

<u>3300</u>

<u>300</u>

1200

<u>1600</u>

525/526-00-100-1001-166-6515

525/526-00-100-1001-166-6892

525/526-00-100-1001-166-6892

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

WILL THE DISTRICT RECEIVE REIMBURSEMENT? **yes**IF SO, SOURCE & AMOUNTS: **Student tuition and tax credit donations.**

HOW ARE CHAPERONE EXPENSES PAID? Included in student cost.

COST TO EACH STUDENT \$ 400

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):

Science club will sell snacks during after school sporting events.

SUBMITTED BY:

Signature

APPROVED BY:

Principal/Supervisor

Patruh Welson

9/20/11

Date

9-28-11

Associate Superintendent/Superintendent

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: IRH	<u>IS</u>		
ESTIMATED NUMBER OF STUDENTS: 35			
NAME OF SCH	HOOL GROUP/CLUB/ENTITY: Enc	ore Show Choir	
STAFF ADVIS <u>Hinojosa</u>	SOR(S)/CHAPERONES: <u>Teresa I</u>	rwin, Melanie Hufford, Kim Fioccoprile, Sherry	
ABSENCE: # D	Days 0 Sub Required: Yes	No # of School Days Missed <u>0</u>	
ACTIVITY / E	EVENT / PURPOSE OF TRAVEL:	Los Alamitos High School Xtravaganza Show Choir	
DESTINATION	NOF TRAVEL: Los Alamitos High	School, 3591 Cerritos, Los Alamitos, CA 90720	
DATES OF TRAVEL: March 22, 2012 - March 25, 2012 (Spring Break) ACADEMIC BENEFITS TO STUDENTS: Encore Show Choir will participate in a competition with schools from all over California. They will be able to see other groups and evaluate their styles and performances in comparison to ours.			
☐ District-own	approval:		
Are expenses pa Parent Organiza		? Auxiliary <u>no</u> Tax Credits <u>yes</u> Club Funds <u>yes</u>	
EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)			
	APPROX. COST	BUDGET CODE	
Registra	\$1552.50	<u>526/850-00-100-3400-280-6892</u>	
Transpo	station <u>\$3300.00</u>	<u>526/850-00-100-3400-280-6519</u>	
Meals	<u>\$2625.00</u>	<u>526/850-00-100-3400-280-6892</u>	
Lodging	ş \$1650.00	<u>526/850-00-100-3400-280-6892</u>	

Lodging

WILL THE DISTRICT REC IF SO, SOURCE & AMOUN	EIVE REIMBURSEMENT? VTS:	<u>no</u>	
HOW ARE CHAPERONE E	XPENSES PAID? <u>Self</u>		
COST TO EACH STUDENT	\$ \$250.00		
	ADE AVAILABLE TO ALL		(LOW FAMILY INCOME
FUNDING SOURCE(S): CI Tax Credit donations	<u>ub</u>		
	ES PLANNED (If applicable): v sales, Chili's give back nigh	nts, Butter Braids, Dance-	a-thon
SUBMITTED BY: Sign:	ature	10/5/ Date	
APPROVED BY: Prin	While By-	Date	/li

Associate Superintendent/Superintendent

Substitutes

TOTAL

<u>0</u>

\$8727.50

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: Cross Middle
ESTIMATED NUMBER OF STUDENTS: 57
NAME OF SCHOOL GROUP/CLUB/ENTITY: Orchestra and Musical Theater
STAFF ADVISOR(S)/CHAPERONES: Mike DeMille, Susie Bottnenkamp, Mindy Ernest, Rot Raine, Lisa Spurlin, Kristina Lopez, Steve Glenn, Norma Palacios, Sheryl Eto, Helen Leighty
and Dana Bunker
ABSENCE: # Days 2 Sub Required: Yes No # of School Days Missed 2
ACTIVITY / EVENT / PURPOSE OF TRAVEL: Forum Music Festival/Disney Performing Arts
DESTINATION OF TRAVEL: Anaheim, California
DATES OF TRAVEL: May 3, 2012 - May 6, 2012 ACADEMIC BENEFITS TO STUDENTS: This is the final and most important competition of the year for the orchestra. They will also work with a college level instructor in a music clinic and work with one of the music personnel at Disneyland, sightreading music from Disney classic movies and hear themselves playing behind the video. The musical theater group will also have a clinic designed for them at the Stella Adler Los Angeles/Hollywood Classrooms, have a group
<u>theater experience behind the scenes with Disney Performing Arts and all will have a chance to</u>
see a professional theater performance.
PROPOSED METHOD OF TRANSPORTATION: District-owned vehicles Transportation approval: Other <u>Two tour buses</u>
Are expenses paid from any of the following accounts? Auxiliary <u>x</u> Tax Credits <u>x</u> Club Funds <u>x</u> Parent Organization

EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

EXI ENSES	REQUESTED: (O)	DIAIN RECEII 15 FOR ALL	INCORRED EATENSES)	
	APPROX.	COST BI	UDGET CODE	
Registration	<u>\$29,751.00</u>		<u>25-00-100-1001-167-6892</u> <u>26-00-100-1001-167-6892</u>	
Transportation	Inc.			
Meals	<u>\$500.00</u>		<u>25-00-100-1001-167-6892</u> 50-00-100-1001-167-6892	
Lodging	Inc.			
Substitutes	<u>\$200.00</u>		25-00-100-1001-167-6113 26-00-100-1001-167-6113	
TOTAL	<u>\$30,451.00</u>			
WILL THE DISTRICT IF SO, SOURCE & AM HOW ARE CHAPERO COST TO EACH STUI	IOUNTS: <u>N/A</u> NE EXPENSES PAI	JRSEMENT? No ID? Trip costs will be paid	by each chaperone	
HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? Through school sources, PTO, fundraising efforts and donations.				
FUNDING SOURCE(S): Parents and fundraising				
FUNDRAISING ACTION FOR THE STATE OF T			rious other fundraisers to be	
SUBMITTED BY:	Michael Signature	Q De Mille	1 <u>0-3-(1</u> Date	

APPROVED BY:

Principal/Supervisor

Associate Superintendent/Superintendent