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	L: <u>IRHS</u>						
ESTIMATED NUMBER OF STUDENTS: 31							
NAME O	NAME OF SCHOOL GROUP/CLUB/ENTITY: <u>Ironwood Ridge Cross Country</u>						
STAFF A	ADVISOR(S)/C	HAPERONES: <u>Stace</u> White, Veronique Ma	ey Wilson(Girl's Hea aizy	<u>ad Coach) Angie (Maria) Dylla (Boy's</u>			
ABSENC	E: # Days <u>3</u>	Sub Required: X Yes	□ No # of S	chool Days Missed 1			
ACTIVIT	Y/EVENT/P	URPOSE OF TRAVE	L: 35 th Annual SoCal I	<u>nvitational</u>			
DESTINA	ATION OF TRA	AVEL: <u>Oceanside, C</u>	alifornia				
ACADEM	DATES OF TRAVEL: October 7-9, 2016 ACADEMIC BENEFITS TO STUDENTS: Competing in an interstate cross country meet with nationally ranked athletes.						
Distriction Distriction	ED METHOD (ct-owned vehicl ation approval: US Coachway		ON:				
	nses paid from a		counts? Auxiliary	_ Tax Credits <u>x</u> Club Funds <u>x</u>			
EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)							
		APPROX. COS	T	BUDGET CODE			
Re	egistration	<u>\$275.00</u>		<u>526/850-00-100-1001-280-6892</u>			
Tr	ansportation	<u>\$3,406.13</u>		<u>526/850-00-100-1001-280-6519</u>			
Me	eals	<u>\$2,375.00</u>		526/850-00-100-1001-280-6892			
Lo	odging	<u>\$2.843.00</u>		526/850-00-100-1001-280-6892			
Su	bstitutes	\$75.00		530-00-100-3400-280-6113			

<u>530-00-100-3400-280-6113</u>

WILL THE DISTRICT RECEIVE REIMBURSEMENT? N/A IF SO, SOURCE & AMOUNTS:				
HOW ARE CHAPERONE EXPENSES PAID? <u>Club Funds</u>				
COST TO EACH STUDENT \$ 297.00				
HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? Additional tax credit donations from community members.				
FUNDING SOURCE(S): Club Funds, Tax Credit, and Parents				
FUNDRAISING ACTIVITIES PLANNED (If applicable): None				
•				
SUBMITTED BY: Signature Date Date				
APPROVED BY: Principal/Supervisor Principal/Supervisor Pate				
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

SCHO	OL: Coronado	<u>K-8</u>						
ESTIN	ESTIMATED NUMBER OF STUDENTS: 60							
NAMI	E OF SCHOOL C	GROUP/CLUB/ENTITY: Huma	unities Social Studies, We the People					
Stewa	art, Donna DiN		parlin, Rebecca Green, LeighAnne Wright, Eric apia, Candace Mayer, Amy McDonald, Christina Roberts					
ABSE	NCE: # Days <u>5</u>	Sub Required: Yes N	# of School Days Missed 3					
ACTIV	/ITY / EVENT /	PURPOSE OF TRAVEL: We t l	ne People National Competition					
DESTI	NATION OF TR	AVEL: <u>George Mason Unive</u>	ersity 4400 University Drive, Fairfax, VA 22030					
ACAD Comp	etition) ability	S TO STUDENTS: Particip	ation in mock Congressional Hearings (National orguments based on evidence; visit historically					
Dis	strict-owned vehi ortation approval		<u> 'ravel Agency</u>					
	penses paid from Organization <u>X</u>	any of the following accounts?	Auxiliary <u>X</u> Tax Credits <u>X</u> Club Funds <u>X</u>					
	EXPENSES F	REQUESTED: (OBTAIN REC	EIPTS FOR ALL INCURRED EXPENSES)					
		APPROX. COST	BUDGET CODE					
	Registration	<u>\$134,000.00</u>	525/526 -00-100-1001-115-6892					
	Transportation	<u>Included</u>						
	Meals	<u>Included</u>						
	Lodging	Included						

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<u>\$900.00</u>

530-00-100-3400-115-6113

TOTAL

\$134,900.00

WILL THE DISTRICT RECEIVE REIMBURSEMENT? No IF SO, SOURCE & AMOUNTS:	
HOW ARE CHAPERONE EXPENSES PAID? Chaperones have a fee of \$1,0	000.00
COST TO EACH STUDENT \$ 2,000	
HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUD PROVISIONS)? Students will participate in fundraising. Scholarships will PTO & Site Council. Waivers can be requested, waivers must be approved	be requested through Coronado
FUNDING SOURCE(S): Gifts and Donations	
FUNDRAISING ACTIVITIES PLANNED (If applicable): <u>Candle and coupon book sales</u> <u>Restaurant nights</u> <u>School wide events</u> <u>Car washes</u>	
SUBMITTED BY: Signature	<u>9/06/16</u> Date
APPROVED BY: Principal/Supervisor	<u>9/06/16</u> Date

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): <u>Da</u>	rlene Mansouri	SCH	OOL: District Offices
	<u> </u>	De	epartment (opt.): <u>State & Federal Pgms/Title I</u>
		DAT	E(S): February 22 - 25, 2017
ACTIVITY/EVENT: 20	017 National Title I Con	<u>ference</u>	
LOCATION: Long 1	Beach Convention Cente	er, Long Beach, CA	
ABSENCE: # Day	s 4 Sub Required: 🔲	Yes 🖾 No	# of School Days Missed 1
EXPENSES REQUEST	ED: (OBTAIN RECEIP	TS FOR ALL INCUR	RED EXPENSES)
	<u>APPROXIMATI</u>	E COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds an require a budget code.)
Registration	<u>\$ 589.00</u>		100-17-100-2240-510-6360
Transportation	<u>\$ 310.20</u>	Mode <u>Airplane</u>	100-17-100-2240-510-6582
Rental Car	W		
Meals	<u>\$ 281.00</u>		100-17-100-2240-510-6582
Lodging	<u>\$1,175.00</u>		100-17-100-2240-510-6582
Substitutes			
TOTAL	<u>\$2,355.20</u>		
The District will [(or)	will not 🛛 receive rein	nbursement from outsi	de sources.
Purpose of travel: To at	tend the 2017 National T	Title I Conference	
	benefits to students and s 1d its impact on State an		egal information regarding the Every Student
The travel is necessary for	or the implementation of t	he project funding the	travel.
1.1	erlene M	-	
Principal	/Supervisor		Date
Mari Associate	e Superintendent/Superint	tendent	<u>138/14</u> Date