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

EMPLOYEE(S):	Todd Jaeger		SCHOOL: District Offices
	ROCHMON ROCK		Department (opt.): Superintendent
	-		DATE(S): February 14-17, 2018
ACTIVITY/EVEN	T: AASA National Co	nference on Education	
LOCATION: <u>N</u>	ashville, TN		
ABSENCE: #	Days 4 Sub Requir	red: 🗌 Yes 🛮 No	# of School Days Missed 4
EXPENSES REQU	JESTED: (OBTAIN RI	ECEIPTS FOR ALL INC	CURRED EXPENSES)
	<u>APPROX</u>	IMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	n <u>\$790.00</u>		001-00-100-2320-501-6360
Transporta	ation <u>\$641.53</u>	Mode <u>Air</u>	001-00-100-2320-501-6582
Rental Car	<u>\$100.00</u>		001-00-100-2320-501-6582
Meals	<u>\$171.50</u>		001-00-100-2320-501-6582
Lodging	<u>\$826.34</u>		001-00-100-2320-501-6582
Substitutes			
TOTAL	<u>\$2,529.37</u>		
The District will	(or) will not ⊠ rece	eive reimbursement from	outside sources.
Purpose of travel: A	Attend AASA Nationa	l Conference on Educat	tion.
			I training for superintendents at conference uding a focus on the Profile of a Graduate Process.
Submitted by: Sign	nature	Jager	<u>1/9/18</u> Date
Prin	acipal/Supervisor	Junarintandant	Date Date

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

EMPLOYEE(S):	Alison Rogers	_ SC	CHOOL: <u>CDO</u>
_	1990 d Sandras Andreas		Department (opt.): IB
-		D	ATE(S): <u>February 16-19, 2018</u>
ACTIVITY/EVENT:	IB Language B, Categ	ory 3	
LOCATION: Gra	nd Rapids, MI		
ABSENCE: # D	ays 4 Sub Required:	⊠Yes □No	# of School Days Missed 2
EXPENSES REQUES	STED: (OBTAIN RECI	EIPTS FOR ALL INCU	JRRED EXPENSES)
	<u>APPROXIM</u>	ATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$ 744.00</u>		<u>140-18-100-2210-510-6360</u>
Transportation	on <u>\$ 550.00</u>	Mode airline	<u>140-18-100-2210-510-6582</u>
Rental Car	\$ 100.00 (shuttle)		140-18-100-2210-510-6582
Meals	<u>\$ 118.00</u>		140-18-100-2210-510-6582
Lodging	<u>\$ 600.00</u>		<u>140-18-100-2210-510-6582</u>
Substitutes	<u>\$ 220.00</u>		<u>140-18-100-2210-510-6113</u>
TOTAL	<u>\$2332.00</u>		
The District will [] (c	or) will not X receive	reimbursement from ou	atside sources.
Purpose of travel: <u>IB</u>] objectives are put in p subject guides are cha	olace and maintained.	and practice require I Subject teachers requ	B specific workshop training to ensure program ire initial training and updated training when
Outcomes and academic	ic benefits to students an	d staff: <u>IB Workshop</u>	s include specialized in depth academic training and ensure critical-thinking and reflective skills
to further advance stu	ident achievement. Cat	egory 3 workshops ar	e specifically designed for experienced IB
<u>educators and meet tr</u>	<u>raining requirements w</u>	hen new subject guide	es are put in place. These workshops are designed
<u>tor experienced 1B ed</u> wokshop is priced the	<u>ucators having taken si</u> same as Cat 1 or 2, bu	<u>tudents through the co</u> t more appropriate fo	omplete course at least once. This level of r this teacher based on experience.
	Divinio do Cata Tor 24 Na	· more appropriate to	tims teacher based on experience.
Submitted by: Signatu	ire Marillo		12/12/17 Date 12/14/12
- /	Mulle		12/m/12

Principal/Supervisor

Associate Superintendent/Superintendent Date

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

EMPLOYEE(S): <u>Ta</u>		CHOOL: <u>District Offices</u> Department (opt.): DATE(S): <u>3/13/18-3/16/18</u>	
	AVID (Advancement Via Individual Determent, OR	mination) District Leadership	
ABSENCE: # Day	ys 4 Sub Required: □Yes ⊠No	# of School Days Missed 4	
EXPENSES REQUES	ΓΕD: (OBTAIN RECEIPTS FOR ALL INC	URRED EXPENSES)	
	APPROXIMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)	
Registration	* See below		
Transportation	Mode <u>airline/tax</u>	<u>100 18 100 2240 515 6582</u>	
Rental Car			
Meals	<u>\$126.25</u>	100 18 100 2240 515 6582	
Lodging	<u>\$800.00</u>	100 18 100 2240 515 6582	
Substitutes			
TOTAL	<u>\$1576.25</u>		
The District will (or) will not (or) receive reimbursement from outside sources. Purpose of travel: AVID (Advancement Via Individual Determination) District Leadership, ADL K-12 training. This training is to support the continued implementation and sustainability of the program in the Amphitheater School District. *Registration is included in our AVID District Leadership Training costs (\$6,000).			
practices and explore of The AVID program ta development for teach	lata to construct an action plan for effecting rgets our underserved students (minority ers; helps schools build community supports.)	t Director will learn effective instructional ve implementation and sustainability at our sites. and average achievers); provides quality staff rt systems for school success; and addresses how to	
Submitted by: Signatu	to rigorous curricula for all students. Solo Call re Sleve Mansociai		

Date

Principal/Supervisor

Associate Superintendent Date Date

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

EMPLOYEE(S):	Todd A. Jaeger	Deanna M. Day	SCHOOL: District Offices
	Vicki Cox Golder	Scott A. Leska	Department (opt.): Superintendent/Governing Brd
	Susan Zibrat		DATE(S): <u>April 5-9, 2018</u>
ACTIVITY/EVEN	IT: <u>National School I</u>	Boards Association (N	SBA) Annual Conference
LOCATION: <u>S</u>	an Antonio, TX		
ABSENCE: #	# Days 5 Sub Requ	ired: Yes No	# of School Days Missed 3
EXPENSES REQU	JESTED: (OBTAIN	RECEIPTS FOR ALL	INCURRED EXPENSES)
	APPRO	XIMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registratio	on <u>\$5,190.00</u>		001-00-100-2579-501/502-6360
Transport	ation <u>\$2,675.00</u>	Mode <u>Air</u>	001-00-100-2579-501/502-6582
Rental Car	<u>\$250.00</u>		001-00-100-2579-501/502-6852
Meals	<u>\$1,196.25</u>		001-00-100-2579-501/502-6582
Lodging	<u>\$5,375.00</u>		001-00-100-2579-501/502-6582
Substitutes			
TOTAL	<u>\$14,686.25</u>		
The District will] (or) will not 🛛 re	ceive reimbursement f	rom outside sources.
Purpose of travel:	Attend National Sch	ool Boards Associatio	n national conference on governance and education.
			lized training for Superintendents and School Board data analysis, technology and education.
Submitted by: Sig	gnature	1. Jager	
	ncipal/Supervisor) se	Date //6//8
As	sociate Superintenden	t/Superintendent	Date

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

EMPLOYEE(S): Kin	nberly <u>Begay</u>	SCHO	OOL: District Offices
<u>Ma</u>	rgaret <u>Blaine</u>	De	partment (opt.): Native American Education
MANAGORIONA		DAT	E(S): <u>April 8-12, 2018</u>
ACTIVITY/EVENT: 20	18 National Johnson (O'Malley Conference	
LOCATION: <u>Tulsa</u> ,	Oklahoma		
ABSENCE: # Days	s <u>5</u> Sub Required:	∃Yes ⊠No	# of School Days Missed 4
EXPENSES REQUEST	ED: (OBTAIN RECEI	PTS FOR ALL INCURE	RED EXPENSES)
	APPROXIMA	TE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$850</u>		230.18.146.2190.510.6360
Transportation	<u>\$1,095</u>	Mode <u>Airplane</u>	230.18.146.2190.510.6582
Rental Car	· ·		
Meals	<u>\$275</u>		230.18.146.2190.510.6582
Lodging	\$400		230.18.146.2190.510.6582
Substitutes	,		
TOTAL	<u>\$2,620</u>		
The District will [(or)) will not 🛛 receive r	eimbursement from outsi	de sources.
	nts and their families	to review mutually deve	ew strategies and techniques for working with eloped standards of educational excellence for ed States.
Outcomes and academic with Native students an			he new strategies and techniques for working
The travel is necessary for	or the implementation of	of the project funding the	travel.
Submitted by: Signatur		5	1/12/18 Date
War	leve Manse	reni	1/12/18
Principa	l/Supervisor		Date 1/16/18
Associat	e Superintendent/Super	rintendent	Date

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

EMPLOYEE(S):	Daniel Bitter		CHOOL: <u>CDO</u> Department (opt.): <u>IB</u> ATE(S): <u>June 24-29, 2018</u>
ACTIVITY/EVENT	: <u>IB Music, Categ</u>	gory 2	
LOCATION: <u>La</u> l	ke Tahoe, CA		
		quired: 🗌 Yes 🛮 No	# of School Days Missed $\underline{0}$
EXPENSES REQUE	STED: (OBTAIN	NRECEIPTS FOR ALL INCU	JRRED EXPENSES)
	APPRO	OXIMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$ 895.00</u>		<u>140-18-100-2210-510-6360</u>
Transportati	on <u>self pay</u>	Mode personal ca	<u>r</u>
Rental Car	<u>\$ 0.00</u>		
Meals	included		-
Lodging	<u>\$ 900.00</u>		<u>140-18-100-2210-510-6582</u>
Substitutes	\$ 0.00		
TOTAL	<u>\$1795.00</u>		
The District will [(or) will not 🛭 re	receive reimbursement from ou	utside sources.
Purpose of travel: <u>IB</u> <u>objectives are put in</u> <u>subject guides are ch</u>	<u>place and mainta</u>	dards and practice require I nined. Subject teachers requ	B specific workshop training to ensure program ire initial training and updated training when
Outcomes and academ to ensure teacher pre to further advance st	paredness in mai	<u>intaining benchmarked rigor</u>	es include specialized in-depth academic training and ensure critical-thinking and reflective skills
Submitted by Signat	bire		12/ <u>QQ</u> /17 Date
Princip	bull Coal/Supervisor	7	Date Date
Associ	ate Superintendent	L	Date Date

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

EMPLOYEE(S): <u>Tas</u>	si Call	SCH	OOL: District Offices
		D	epartment (opt.):
		DAT	TE(S): <u>7/9/18-7/12/18</u>
ACTIVITY/EVENT: AV	VID (Advancemer	ıt Via Individual Determir	nation) District Leadership
LOCATION: <u>Seattle</u>	<u>, WA</u>		
ABSENCE: # Days	s <u>4</u> Sub Require	ed: 🗌 Yes 🛮 No	# of School Days Missed 0
EXPENSES REQUESTI	ED: (OBTAIN RE	CCEIPTS FOR ALL INCUR	RED EXPENSES)
	<u>APPROXI</u>	MATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	* See below		
Transportation	<u>\$650.00</u>	Mode <u>airline/taxi</u>	<u>100 18 100 2240 515 6582</u>
Rental Car			
Meals	<u>\$212.75</u>		<u>100 18 100 2240 515 6582</u>
Lodging	<u>\$1000.00</u>		<u>100 18 100 2240 515 6582</u>
Substitutes			
TOTAL	<u>\$1862.75</u>		
The District 11	:11 mat M mass	in a maintain and from and	a! 4a aayyaaa
The District will [] (or)	will not 🖂 rece	ive reimbursement from out	side sources.
			on) District Leadership, ADL K-12 training.
			inability of the program in the Amphitheater dership Training costs (\$6,000).
School District. Regist	ration is included	in our Avid District Leav	Training costs (\$\psi_0000\frac{1}{2}\$)
			irector will learn effective instructional
		_	implementation and sustainability at our sites. I average achievers); provides quality staff
development for teache	rs; helps schools b	ouild community support s	ystems for school success; and addresses how to
grant equitable access t	o rigorous curricu	ila for all students.	
	1 answi		
Submitted by:	Janes (<u>1/8/18</u>
Signature	• / <i>(20</i> /	1 .	Date
NO	elene 7/1	moceri	1/10/18

Date

Principal/Supervisor

Associate Superintendent/Superintendent Date 1/8

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

EMPLOYEE(S): $\underline{\mathbf{J}}_{\mathbf{I}}$	<u>ılie Valenzuela, Le</u>	<u>eslie Christian, Betsy Ga</u>	rdner, Robert Craig, Nicholas Woodard, Jessica
Roodvoets, Andragay	yle Pye, Jeff Panneck, Thomas Holaday, Michelle Ernst and Kelly Mulari. Alternates: Allison		
Januszewski, Christin	na Michaels, Kath	ryn Dodds, and Gayle T	<u>'aylor.</u>
S	CHOOL: <u>La Cim</u> a	<u>Middle</u>	
	Non-resonant projet		Department (opt.):
Piloto	None of the latest and the latest an]	DATE(S): <u>July 9-12, 2018</u>
	Advancement Via I le, WA	Individual Determinatio	on Summer Institute
ABSENCE: # Day	ys <u>4</u> Sub Requir	ed: 🗌 Yes 🔲 No	# of School Days Missed 0
EXPENSES REQUES	ΓED: (OBTAIN RI	ECEIPTS FOR ALL INC	URRED EXPENSES)
	<u>APPROX</u>	IMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$8,360.00</u>		<u>100-18-100-2210-165-6360</u>
Transportation	s \$4,500.00	Mode <u>Air</u>	100-18-100-2210-165-6582
Rental Car	<u>\$800.00</u>		100-18-100-2210-165-6582
Meals	<u>\$2,340.25</u>		<u>100-18-100-2210-165-6582</u>
Lodging	<u>\$4,500.00</u>		100-18-100-2210-165-6582
Substitutes			
TOTAL	<u>\$20,500.25</u>		
Pho District will 🗍 🗸	\		

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

Purpose of travel: <u>AVID (Advancement Via Individual Determination) training for AVID Site Team to support the implementation of the program at our school. Our team will consist of the Principal, media specialist, and content area teachers.</u>

Outcomes and academic benefits to students and staff: <u>Teachers will learn effective instructional practice and our site team will explore data to construct an action plan for effective implementation at our site. The AVID program targets our underserved students (minority and students in the academic middle); provides quality staff development for teachers; helps schools build community support systems for student success; and addresses how to grant equitable access to rigorous curricula for all students.</u>

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

Submitted by:	
Signature	Date
Dr	1/9/18
Principal/Supervisor	Date
Fran helm	1/15/18
Associate Superintendent/Superintendent	Date

rev. 8/25/17

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

EMPLOYEE(S): <u>Eliz</u>	zabeth Wick	Bonnie Keene	SCHOOL: <u>Holaway</u>
Pat	ricia Patchin	Jill Sincliar	Department (opt.):
<u>Ch</u>	<u>ris Gutierrez</u>		DATE(S): <u>7/9/18-7/12/18</u>
ACTIVITY/EVENT: A	dvancement Via 1	Individual Determinatio	n (AVID) Summer Institute
LOCATION: <u>Seattle</u>	e, WA		
ABSENCE: # Days	s 4 Sub Requi	red: 🗌 Yes 🛮 No	# of School Days Missed 0
·	-		, <u> </u>
EXPENSES REQUEST	ED: (OBTAIN R	ECEIPTS FOR ALL IN	(CURRED EXPENSES)
	<u>APPROX</u>	IIMATE COST	BUDGET CODE/DESCRIPTION
			(Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$4,000.00</u>		<u>100-18-100-2210-108-6360</u>
Transportation	\$5,000,00	Mode <u>Air/Tax</u> i	
•	<u>\$5,000.00</u>	Mode Air/Taxi	<u>100-18-100-2210-108-6582</u>
Rental Car	I		
Meals	\$ <u>1063.75</u>		<u>100-18-100-2210-108-6582</u>
Lodging	<u>\$4,420.00</u>		100-18-100-2210-108-6582
Substitutes			
TOTAL	\$ <u>14,483.75</u>		
The District will [(or)	will not 🛛 rec	eive reimbursement fror	n outside sources.
Purpose of travel: Teach	ners will attend A	VID Summer Institute	e 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: <u>Increase teacher knowledge</u> . <u>Increase student achievement</u> .			
	1.1		
	Guturnez		
Submitted by:) Our start	•	<u>1/11/18</u>
Signature	e		

(. Luturez	
Principal/Supervisor	 <u>1/11/18</u> Date
Associate Superintendent/Superintendent	 1/16/18 Date

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

EMPLOYEE(S): Jen	nifer Letts, Jennifer Queiruga, Rebecca Bu	rnett, Brenda King, Cary Reis, Phil Tilicki,	
Courtney Cummins, Li	ndsay Callison, Sarah Lortie, Corina Charl	<u>es</u>	
SCI	HOOL: AMS		
Rest according to	Department (opt.):		
PPONTERIALISM	DAT	TE(S): <u>July 9-12, 2018</u>	
ACTIVITY/EVENT: AV	/ID (Advancement Via Individual Determin	ation) Summer Institute	
LOCATION: <u>Seattle</u> ,	<u>, WA</u>		
ABSENCE: # Days	4 Sub Required: □Yes ⊠No	# of School Days Missed 0	
EXPENSES REQUESTE	ED: (OBTAIN RECEIPTS FOR ALL INCUR	RED EXPENSES)	
	APPROXIMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)	
Registration	<u>\$7,950.00</u>	<u>100-18-100-2210-166-6360</u>	
Transportation	\$5,000.00 Mode airline/taxi	<u>100-18-100-2210-166-6582</u>	
Rental Car		E-13/10	
Meals	<u>\$2,127.50</u>	100-18-100-2210-166-6582	
Lodging	<u>\$6,000.00</u>	100-18-100-2210-166-6582	
Substitutes			
TOTAL	<u>\$21,077.50</u>		
The District will (or)	will not receive reimbursement from outs	side sources.	
<u> </u>	(Advancement Via Individual Determinina ne program at our school. Our team will con	tion) training for AVID Site Team to support asist of the principal and the content area	
Outcomes and academic basite team will explore datargets our underserved	ta to construct an action plan for effective in students (minority and average achievers); puild community support systems for school	earn effective instructional practices and our mplementation at our site. The AVID program provides quality staff development for success; and addresses how to grant equitable	

Submitted by:

Principal/Supervisor

Date

Menu helso

1-10-17