

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

SCHOOL: District Offices

Department (opt.): Interscholastics

DATE(S): 6/4 - 6/7

ACTIVITY/EVENT: Athletic Equipment Managers Association Annual Convention

LOCATION: Cleveland, OH

ABSENCE: # Days 4 Sub Required: Yes No

of School Days Missed N/A

EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

<u>APPROXIMATE COST</u>		<u>BUDGET CODE/DESCRIPTION</u>
Registration	<u>75.00</u>	<u>0010062025795126360</u>
Transportation	<u>950.00</u> Mode <u>Air/Ground</u>	<u>0010062025795126582</u>
Rental Car	_____	_____
Meals	<u>190.00</u>	<u>0010062025795126582</u>
Lodging	<u>500.00</u>	<u>0010062025795126582</u>
Substitutes	_____	_____
TOTAL	<u>1715.00</u>	

(Note: Tax credit contributions are District funds and require a budget code.)

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

Purpose of travel: To attend the Athletic Equipment Managers Association annual convention.

Outcomes and academic benefits to students and staff: To maintain certification to include the proper fitting of shoulder pads and helmets for football players and stay up-to-date on safety equipment and safety issues for all sports played in the district.

Submitted by:

[Signature]
Signature

4/23/12

Date

[Signature]
Principal/Supervisor

4/23/12

Date

[Signature]
Associate Superintendent/Supervisor

5-1-12

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): Robert Clouse _____

SCHOOL: IRHS

Department (opt.): Science Department

DATE(S): 6/18-22/12

ACTIVITY/EVENT: AP* By the Sea Summer Institutes - Physics

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>
Registration	<u>\$715.00</u>		<u>140-12-100-2210-510-6360</u>
Transportation	<u>\$200.00</u>	Mode <u>Air</u>	<u>140-12-100-2210-510-6582</u>
Rental Car	_____		_____
Meals	<u>\$236.00</u>		<u>140-12-100-2210-510-6582</u>
Lodging	<u>\$304.00</u>		<u>140-12-100-2210-510-6582</u>
Substitutes	_____		_____
TOTAL	<u>\$1,455.00</u>		

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

Purpose of travel: Attend AP Phvsics Workshop

Outcomes and academic benefits to students and staff: New class being offered

Submitted by: Robert Clouse _____ 4/27/12
Signature Date
Michael Byars _____ 4/27/12
Principal/Supervisor Date
Patricia Nelson _____ 5-1-12
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): Christine Sullivan, Debbie Garcia, Polly Kimminau, Sarah Andricopoulos, Jessica Fredeen, Corrine Blum, Bonnie Keene, Katrina Schleicher. Alternates: Marni Gould, Kymberly Brown

SCHOOL: La Cima Middle School

DATE(S): July 29-August 2, 2012

ACTIVITY/EVENT: AVID Summer Institute

LOCATION: Philadelphia, PA

ABSENCE: # Days 0 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>\$4,683.00</u>	<u>100-12-100-2210-165-6360</u>
Transportation	<u>\$5,436.00</u> Mode <u>Air</u>	<u>100-12-100-2210-165-6582</u>
Rental Car	<u>\$ 350.00</u>	<u>100-12-100-2210-165-6582</u>
Meals	<u>\$2,360.00</u>	<u>100-12-100-2210-165-6582</u>
Lodging	<u>\$4,000</u>	<u>100-12-100-2210-165-6582</u>
Substitutes	_____	_____
TOTAL	<u>\$16,829.00</u>	

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

Purpose of travel: AVID (Advancement Via Individual Determination) training for out AVID Site Team to support the implementation of the program. This will include our district coordinator, site coordinator, AVID elective teachers, and two content area teachers.

Outcomes and academic benefits to students and staff: Teachers will learn effective instructional practices and our site team will explore data to construct an action plan for effective implementation. The AVID program targets our underserved students (minority and average achievers); provides quality staff development for teachers; helps schools build community support systems for school success; and addresses how to grant equitable access to rigorous curricula for all students.

Submitted by: 80165 cs 04/27/12
Signature Date
80100 tc 04/27/12
Principal/Supervisor Date
Katrina Wilson 5-1-12
Associate Superintendent/Supervisor Date

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): Tassi Call, Tanya Wall, Mary Grace Salamon, Aaron Berger, Rob Wolf, Trista DiVetta, Jennifer Quiruga, Ashley Hilst, Debbie Melde, Iris Coleman. Alternate: Breanna Peters

SCHOOL: Amphitheater Middle School

DATE(S): July 29-August 2, 2012

ACTIVITY/EVENT: AVID Summer Institute

LOCATION: Philadelphia, PA

ABSENCE: # Days 0 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>\$6,690.00</u>	<u>100-12-100-2210-1666360</u>
Transportation	<u>\$6,800.00</u> Mode <u>Air</u>	<u>100-12-100-2210-166-6582</u>
Rental Car	_____	_____
Meals	<u>\$2,950.00</u>	<u>100-12-100-2210-166-6582</u>
Lodging	<u>\$4,000.00</u>	<u>100-12-100-2210-166-6582</u>
Substitutes	_____	_____
TOTAL	<u>\$20,440.00</u>	

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

Purpose of travel: AVID (Advancement Via Individual Determination) training for out AVID Site Team to support the implementation of the program. This will include our district coordinator, site coordinator, AVID elective teachers, and two content area teachers.

Outcomes and academic benefits to students and staff: Teachers will learn effective instructional practices and our site team will explore data to construct an action plan for effective implementation. The AVID program targets our underserved students (minority and average achievers); provides quality staff development for teachers; helps schools build community support systems for school success; and addresses how to grant equitable access to rigorous curricula for all students.

Submitted by: Tassi Call 4/26/12
 Signature Date
 80100 tc 4.26.12
 Principal/Supervisor Date
Patricia Nelson 5-1-12
 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: CDO

ESTIMATED NUMBER OF STUDENTS: 13

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

STAFF ADVISOR(S)/CHAPERONES: Cymry DeBoucher, Texana and Jim Sonnefeld, Bob and Kathy Cramb

ABSENCE: # Days 2 Sub Required: Yes No # of School Days Missed 2

ACTIVITY / EVENT / PURPOSE OF TRAVEL: World finals

DESTINATION OF TRAVEL: Ames, Iowa - Iowa State University

DATES OF TRAVEL: May 22 - May 27, 2012

ACADEMIC BENEFITS TO STUDENTS: 21st Century Skills development

PROPOSED METHOD OF TRANSPORTATION:

District-owned vehicles

Transportation approval: _____

Other Airline tickets and rental vans or ground transportation

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>9100.00</u>	<u>850/526-00-100-3400-282-6892</u>
Transportation	<u>8500.00</u>	<u>850/526-00-100-3400-282-6515</u>
Meals	<u>1000.00</u>	<u>850/526-00-100-3400-282-6892</u>
Lodging	_____	_____
Substitutes	<u>0</u>	_____

TOTAL

18600.00

WILL THE DISTRICT RECEIVE REIMBURSEMENT? No
IF SO, SOURCE & AMOUNTS: _____

HOW ARE CHAPERONE EXPENSES PAID? yes

COST TO EACH STUDENT \$ 1430.00

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

FUNDING SOURCE(S): auxiliary, tax credits, club account

FUNDRAISING ACTIVITIES PLANNED (If applicable):

t-shirt sales, food sales at the Odyssey state tournament, restaurant donations, tax credit drive

SUBMITTED BY: Cynthia DeBorja 4/20/12
Signature Date

APPROVED BY: Michele Lopez 4/24/12
Principal Supervisor Date

Patrick Nelson 5-1-12
Associate Superintendent/Superintendent Date

AMPHITHEATER PUBLIC SCHOOLS
STAFF/STUDENT TRAVEL REQUEST

Attach supporting documentation as needed

ORIGINAL SUBMISSION

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SCHOOL: **IRHS**

ESTIMATED NUMBER OF STUDENTS: 1

NAME OF SCHOOL GROUP/CLUB/ENTITY: **On the Ridge Design/SkillsUSA**

STAFF ADVISOR(S)/CHAPERONES: **Craig Baron 1/1 Parent Chaperone Teri Hefferan**

ABSENCE: # Days 6 Sub Required: Yes No # of School Days Missed 0

ACTIVITY / EVENT / PURPOSE OF TRAVEL: **SkillsUSA National Competiton**

DESTINATION OF TRAVEL: **Kansas City, MO**

DATES OF TRAVEL: **June 23-28, 2012**

ACADEMIC BENEFITS TO STUDENTS: **Compete in the national design competition**

PROPOSED METHOD OF TRANSPORTATION:

District-owned vehicles

Transportation approval: _____

Other **Airplane**

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
	\$1,585 (Air, registration, hotel)	596-83-270-2190-280-6582
	\$1,286 (Air, registration, hotel)	596-83-270-2190-280-6892
Registration	\$1,200 (Air, registration,hotel)	850-00-100-3400-280-6892
Transportation	_____	_____
	\$255	<u>400-12-270-2190-280-6582</u>
Meals	_____	_____
Lodging	_____	_____
Substitutes	_____	_____
TOTAL	<u>\$4,326.00</u>	

WILL THE DISTRICT RECEIVE REIMBURSEMENT? no
IF SO, SOURCE & AMOUNTS: _____


HOW ARE CHAPERONE EXPENSES PAID? CTE

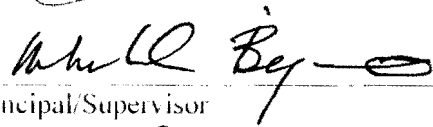
COST TO EACH STUDENT \$ 255 for meals


HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? Scholarship money, JTED funds, and matching CTE funds

FUNDING SOURCE(S): Scholarship money, JTED funds, and matching CTE funds

FUNDRAISING ACTIVITIES PLANNED (If applicable):

SUBMITTED BY:  4/18
Signature Date

APPROVED BY:  _____
Principal/Supervisor Date

 4-23-12
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: CDO

ESTIMATED NUMBER OF STUDENTS: 7

NAME OF SCHOOL GROUP/CLUB/ENTITY: CDO - FCCLA - Early Childhood, FCCLA- Culinary Arts

STAFF ADVISOR(S)/CHAPERONES: Jennifer Atteberry-Pierpont, Nick Meitner

ABSENCE: # Days 8 Sub Required: Yes No # of School Days Missed 0

ACTIVITY / EVENT / PURPOSE OF TRAVEL: FCCLA National Leadership Meeting

DESTINATION OF TRAVEL: Orlando, FL

DATES OF TRAVEL: July 6-12, 2012

ACADEMIC BENEFITS TO STUDENTS: Competition and Leadership Skills

PROPOSED METHOD OF TRANSPORTATION:

District-owned vehicles

Transportation approval: _____

Other Airplane

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

EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

	APPROX. COST	BUDGET CODE
Registration	<u>1,888.00</u>	<u>400-12-270-2190-282-6360</u>
	<u>6,888.00</u>	<u>850/526-00-100-3400-282-6892</u>
Transportation	<u>1500.00</u>	<u>400-12-270-2190-282-6582</u>
	<u>5250.00</u>	<u>850/526-00-100-3400-282-6582</u>
Meals	<u>704.00</u>	<u>400-12-270-2190-282-6582</u>
	<u>2,464.00</u>	<u>850/526-00-100-3400-282-6892</u>
Lodging	<u>2,166.00</u>	<u>400-12-270-2190-282-6582</u>
	<u>2,167.00</u>	<u>850/526-00-100-3400-282-6892</u>
Substitutes	_____	_____
TOTAL	<u>23,027.00</u>	

WILL THE DISTRICT RECEIVE REIMBURSEMENT? Yes
IF SO, SOURCE & AMOUNTS: Pima County JTED - 350.00 per traveler


HOW ARE CHAPERONE EXPENSES PAID? self

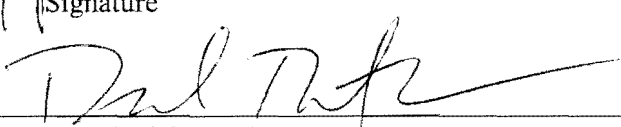
COST TO EACH STUDENT \$ 2,276.00 or 2,005.00

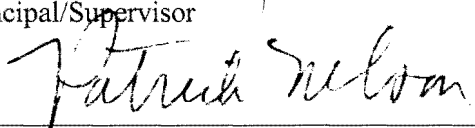
HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? scholarships, Tax Credits

FUNDING SOURCE(S): CTE, Club Funds, Tax Credits

FUNDRAISING ACTIVITIES PLANNED (If applicable):
Catering Events, Candy Sales

SUBMITTED BY:  4/23/12
Signature Date

APPROVED BY:  4-23-12
Principal/Supervisor Date

 5-1-12
Associate Superintendent/Superintendent Date