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

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SCHOOL: <u>IRHS</u>			
ESTIMATED NUMBER OF	STUDENTS: 5		
NAME OF SCHOOL GROU	IP/CLUB/ENTITY:	IRHS DECA	
STAFF ADVISOR(S)/CHAF	PERONES: <u>Joshu</u>	a Bohan	
ABSENCE: # Days 6 Sub	Required: 🛚 Yes	☐ No	# of School Days Missed 4
ACTIVITY / EVENT / PU DECA Competition	JRPOSE OF TRAV	VEL: <u>Internat</u>	ional Career Development Center (ICDC)
DESTINATION OF TRAVE	EL: Nashville, TN		
management on the loca	O STUDENTS: <u> </u>	a.Leadership ational level, Career explor	development, b. DECA organization and c. DECA activities and competitive events ation and/or career development activities ment
PROPOSED METHOD OF To District-owned vehicles Transportation approval: Other <u>Air</u>		on:	
Are expenses paid from any of Parent Organization	of the following acc	ounts? Auxilia	ry <u>X</u> Tax Credits <u>X</u> Club Funds <u>X</u>
EXPENSES REQ	UESTED: (OBTA	IN RECEIPTS	S FOR ALL INCURRED EXPENSES)
	APPROX. COS	Т	BUDGET CODE
Registration	<u>\$100.</u> <u>\$600.</u>		<u>596-85-270-2190-280-6360</u> <u>850-00-100-1001-280-6892</u>
Transportation	<u>\$950.</u> \$4750.		<u>596-85-270-2190-280-6582</u> <u>526-00-100-1001-280-6519</u>
Meals	<u>\$528.</u> N/A Students P		<u>596-85-270-2190-280-6582</u>
	<u>\$7</u>	00	<u>596-85-270-2190-280-6582</u>

\$2,400

Lodging

596-85-270-2190-280-6892

TOTAL \$10,428.00

WILL THE DISTRICT RECEIVE REIMBURSEMENT? <u>N/A</u> IF SO, SOURCE & AMOUNTS:	
HOW ARE CHAPERONE EXPENSES PAID? CTE	
COST TO EACH STUDENT \$ 620	
HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUPPROVISIONS)? club funds, tax credits, and fund raising	DENTS (LOW FAMILY INCOME
FUNDING SOURCE(S): Hawk House (SBE), fund raising, CTE, & Pir	ma County JTED
FUNDRAISING ACTIVITIES PLANNED (If applicable): car washes, TBD	
The travel is necessary for the implementation of the project funding the trave	1.
SUBMITTED BY: Signature APPROVED BY: Alacu G Juliut Principal/Supervisor	$\frac{3/10/16}{\text{Date}}$ $\frac{3/10/16}{\text{Date}}$
Associate Superintendent/Superintendent	3/11/16 Date

EMPLOYEE(S):	George	Goodridge		SCHOOL: <u>IRHS</u>
				Department (opt.):
				DATE(S): <u>04/06/2016-04/10/2016</u>
			tic Trainers Assoc	-
LOCATION: _	Albuquero	que Marriott 2	101 Louisiana Blvo	l. Albuquerque, NM
ABSENCE: #	[‡] Days <u>5</u>	Sub Required:	⊠Yes □No	# of School Days Missed 3
EXPENSES REQU	JESTED: (OBTAIN RECE	EIPTS FOR ALL IN	CURRED EXPENSES)
		<u>APPROXIMA</u>	ATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registratio	on <u>\$10</u>	<u>5.00</u>		<u>260-16-270-2210-280-6360</u>
Transport	ation		Mode	
Rental Car	<u>\$30</u>	0.00		001-00-620-2410-512-6582
Meals	<u>\$18</u>	<u>4.00</u>		001-00-620-2410-512-6582
Lodging	<u>\$24</u>	<u>6.75</u>		<u>525-00-100-1001-280-6582</u>
Substitutes	<u>\$30</u>	0.00		<u>260-16-270-2210-280-6113</u>
TOTAL	<u>\$1,1</u>	135.75		
The District will	or) will 1	not 🛛 receive	reimbursement fron	n outside sources.
Purpose of travel:	Annual cor	nference on cur	rent trends and pr	actices for Athletic Trainers.
Outcomes and acad				nal conference will provide training on current issues
The travel is necess	ary for the	implementation	of the project fundi	ng the travel.
Submitted by:	Lin	arlal		07 MARCHILL
Sig	nature	1'11		Date Date
\mathcal{A}	Jaras		uff	3/7/16
Prii	ncipal/Supe	rvisor		Date
<u>h</u>	raines	1 helv		5/10/16
Ass	ociate Supe	erintendent/Supe	rintendent	Date

EMPLOYEE(S): <u>Cass</u>	sidy <u>Elliott</u>	SCHOOL: <u>CDO</u>
	-	Department (opt.):
		DATE(S): <u>04/06/2016-04/10/2016</u>
ACTIVITY/EVENT: Ro	ocky Mountain Athletic Trainers Asso	ciation Symposium
LOCATION: Albu	querque Marriott 2101 Louisiana Bly	d. Albuquerque, NM
ABSENCE: # Days	s <u>5</u> Sub Required: ⊠Yes □No	# of School Days Missed 3
EXPENSES REQUESTI	ED: (OBTAIN RECEIPTS FOR ALL I	NCURRED EXPENSES)
	APPROXIMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$80.00</u>	<u>260-16-270-2210-282-6360</u>
Transportation	Mode	
Rental Car		
Meals	<u>\$184.00</u>	001-00-620-2410-512-6582
Lodging	<u>\$493.49</u>	<u>525-00-620-2210-282-6582</u>
Substitutes	<u>\$300.00</u>	<u>260-16-270-2210-282-6113</u>
TOTAL	<u>\$1,057.49</u>	
The District will [] (or)) will not \(\subseteq receive reimbursement from the property of the	om outside sources.
Purpose of travel: Annu	nal conference on current trends and p	practices for Athletic Trainers.
Outcomes and academic and updated research f		nual confrence will provide training on current issues
The travel is necessary f	for the implementation of the project fun	ding the travel.
Submitted by:	sindly & (fol)	3416
Signatu	Te Dull-	3/7/16
Principa	al/Supervisor	Date
Jan	mi Itlan	31416
Associa	te Superintendent/Superintendent	Date

EMPLOYEE(S):	<u>Wylie</u>	<u>Yaw</u>	;	SCHOOL: AHS	
				Department (opt.):	
		<u></u>		DATE(S): <u>04/06/2016-04/10/2016</u>	
ACTIVITY/EVEN	T: Rocky	Mountain Athl	etic Trainers Associ	iation Symposium	
LOCATION: _	Albuque	rque Marriott 2	2101 Louisiana Blvd	l. Albuguergue, NM	
ABSENCE:	# Days <u>5</u>	Sub Required	:⊠Yes □No	# of School Days Missed 3	
EXPENSES REQU	UESTED:	(OBTAIN REC	EIPTS FOR ALL IN	CURRED EXPENSES)	
		APPROXIM	IATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District fur require a budget code.)	
Registration	on <u>\$1</u>	105.00		<u>260-16-270-2210-281-6360</u>	
Transport	ation _		Mode		
Rental Car					
Meals	<u>\$1</u>	<u> 184.00</u>		<u>001-00-620-2410-512-6582</u>	
Lodging	<u>\$2</u>	<u> 246.75</u>		<u>525-00-620-3400-281-6582</u>	
Substitute	s <u>\$3</u>	800.00		<u>260-16-270-2210-281-6113</u>	
TOTAL	<u>\$8</u>	<u>335.75</u>			
The District will	or) wil	ll not 🛛 receive	e reimbursement fron	n outside sources.	
Purpose of travel:	Annual c	onference on cu	rrent trends and pr	ractices for Athletic Trainers.	
Outcomes and aca and updated rese				ual conference will provide training on current	issue
The travel is necess	sary for the	e implementation	of the project funding	ng the travel.	
Submitted by:	VIllian:	K Jaw II		3316	
Sig	gnature			Date 3/3/1 (4	
P ri	ncipal/s/u	bervisor		Date	
	Then	in hu	lu	3/11/18	
\overline{As}	sociate Su	perintendent/Sup	perintendent	Date	

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

EMPLOYEE(S):	Sue Clark		SCHOOL: <u>Holaway</u>
			Department (opt.):
		-	DATE(S): <u>5/11-5/13</u> , <u>2016</u>
ACTIVITY/EVEN	T: <u>Engineerin</u>	g is Elementary Training	
LOCATION: <u>B</u>	oston, MA		,
ABSENCE: #	Days <u>3</u> Su	ıb Required: ⊠Yes □No	# of School Days Missed 3
EXPENSES REQU	JESTED: (OB	TAIN RECEIPTS FOR ALL IN	NCURRED EXPENSES)
	<u> </u>	APPROXIMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registratio	n <u>\$250</u>		Covered by Teacher Scholarship
Transporta	ation <u>\$649</u>	Mode <u>Air/Taxi</u>	530-00-100-1001-108-6582
Rental Car			
Meals	<u>\$111</u>		<u>530-00-100-1001-108-6582</u>
Lodging	<u>\$930</u>		5300010010011086582/1401610022105106582
Substitutes	<u>\$375</u>		140-16-100-2210-510-6113
TOTAL	\$ <u>2,065</u>		
The District will] (or) will not	receive reimbursement fro	m outside sources.

Purpose of travel:

This learner-driven workshop is designed to build knowledge of engineering and confidence in teaching it. The teacher will get hands-on experience with EiE materials and insights into the most effective strategies for teaching the curriculum.

Outcomes and academic benefits to students and staff: Increase teacher knowledge and student achievement.

During this two-day, hands-on workshop, teachers will

- gain foundational knowledge of technology, engineering, and the engineering design process
- become familiar with how EiE curriculum units are structured
- become familiar with EiE's underlying pedagogical approach
- experience two different EiE units, both as a learner and as a teacher
- reflect on the learning experiences your students will have with EiE
- reflect on the instructional strategies you've learned

Teachers will leave this workshop

- prepared to teach any EiE unit in the classroom
- confident that they can implement open-ended engineering design challenges with their students
- equipped with the EiE Teacher Guide of their choice

Submitted by:	(. Guturrez	3/1/16
	Signature	Date
	(Huturez_	3/1/16
	Principal/Supervisor	Date
	Associate Superintendent/Superintendent	

rev. 9/21/05

EMPLOYEE(S):	Catherine Zack, Maria Figueroa	SCHOOL: District Offices
_		Department (opt.): Food Service
		DATE(S): <u>July 10-13, 2016</u>
ACTIVITY/EVENT	: Annual National Conference for (S	NA) School Nutrition Association
LOCATION: <u>Sar</u>	n Antonio, TX	
ABSENCE: # I	DaysℲ Sub Required: □Yes ⊠N	o # of School Days Missed <u>0</u>
EXPENSES REQUE	ESTED: (OBTAIN RECEIPTS FOR A	LL INCURRED EXPENSES)
	APPROXIMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$570.00</u>	<u>510-00-100-3100-526-6360</u>
Transportat	ion \$966.40 Mode <u>ai</u>	<u>510-00-100-3100-526-6582</u>
Rental Car		
Meals	<u>\$268.00</u>	<u>510-00-100-3100-526-6582</u>
Lodging	<u>\$600.00</u>	<u>510-00-100-3100-526-6582</u>
Substitutes	· .	
TOTAL	<u>\$2,404.40</u>	
The District will	(or) will not ⊠ receive reimburseme	ent from outside sources.
Purpose of travel: <u>T</u> federal rules and re	o attend ANC professional growth co gulations for (NSLP) National Schoo	onference and learn new ways to be compliant with new ol Lunch Program.
Outcomes and acade and lunch.	mic benefits to students and staff: To	meet new standards and regulations for school breakfast
Submitted by: Sign	Mm Japan	
far	mes 83 wrn cipal/Supervisor	
Assr	ciate Superintendent/Superintendent	

<u>Patricia</u>	a Marquez, Kathy Neumaier, al National Conference for (SNA	<u>Maritza Ellis</u> DATE(S): <u>July 10-13, 2016</u> A) School Nutrition Association
ACTIVITY/EVENT: Annu	al National Conference for (SNA	
		A) School Nutrition Association
		A) School Nutrition Association
LOCATION: San Anton	nio, TX	
200111011, Dun 1411tol		
ABSENCE: # Days 4	Sub Required: ☐Yes ☒No	# of School Days Missed 0
EXPENSES REQUESTED:	(OBTAIN RECEIPTS FOR ALI	L INCURRED EXPENSES)
	APPROXIMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration \$2	2,430.00	<u>510-00-100-3100-526-6360</u>
Transportation <u>\$3</u>	3,865.60 Mode <u>air</u>	<u>510-00-100-3100-526-6582</u>
Rental Car		·
Meals <u>\$1</u>	1072.00	510-00-100-3100-526-6582
Lodging \$2	2,430.00	<u>510-00-100-3100-526-6582</u>
Substitutes		
TOTAL \$9	<u> </u>	
The District will (or) wi	Il not receive reimbursement	from outside sources.
	l ANC professional growth conf ns for (NSLP) National School I	ference and learn new ways to be compliant with new Lunch Program.
Outcomes and academic ben and lunch.	efits to students and staff: To me	eet new standards and regulations for school breakfast
Submitted by: Signature	in Jappit	3/10/16 Date
Aimes Principal/Su	&Burn- pervisor	Date 3/10/16 3/11/16 3/11/16
Associate Si	perintendent/Superintendent	7/1/L