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 Mic	<u>ldle</u>			
ESTIMATED NUMBER OF STUDENTS: 12				
NAME OF SCHOOL GROUP/CLUB/ENTITY: Odyssey of the Mind				
STAFF ADVISOR(S) Lowery, Julie Eblen	STAFF ADVISOR(S)/CHAPERONES: <u>Lisa DaDeppo, Molly Mikles, Leslie Ferre, Leann Calvin, Jenny Lowery, Julie Eblen</u>			
ABSENCE: # Days 6	Sub Required: X Yes	□ No #	of School Days Missed <u>3</u>	
ACTIVITY / EVENT	PURPOSE OF TRAVEL	: Odyssey of the l	Mind World Finals	
DESTINATION OF T	RAVEL: <u>Michigan State</u>	University, Lansi	ing, MI	
ACADEMIC BENEFI student competition.		lobal understand	ing and advanced creative problem solving	
PROPOSED METHOD OF TRANSPORTATION: District-owned vehicles Transportation approval: X Other Commercial Airlines, Commercial Bus Company				
Are expenses paid from any of the following accounts? Auxiliary \underline{X} Tax Credits \underline{X} Club Funds \underline{X} Parent Organization \underline{X}				
EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)				
	APPROX. COST	`	BUDGET CODE	
Registration	<u>\$11,870.0</u>	<u>0</u>	<u>525/526/850-00-100-1001-167-6892</u> <u>001-00-100-1001-520-6892</u>	
Transportation	<u>\$6,560.0</u>	<u>0</u>	525/526-00-410-2710-167-6519	
Meals	<u>\$1,200.00</u>	<u>0</u>	525/526-00-100-1001-167-6892	
Lodging	Included in Registration	<u>1</u>		
Substitutes	<u>\$330.00</u>	0	<u>525/526-00-100-1001-167-6113</u>	
TOTAL	\$19,960.00	<u>o</u>		

HOW ARE CHAP	ERONE EXPENSES PAID? Chaperones are responsible	for all their expenses
COST TO EACH S	STUDENT \$ 1,640.00	
HOW IS THIS TR PROVISIONS)? T	AVEL MADE AVAILABLE TO ALL ELIGIBLE STUDE AX Credit, PTO support, Donations	DENTS (LOW FAMILY INCOME
FUNDING SOURCE Foundation Donat	CE(S): Cross Auxiliary Funds, PTO support, Tax (ion, and Amphitheater District Contribution.	Credit Donations, Amphitheater
FUNDRAISING A Tax Credit Drive,	CTIVITIES PLANNED (If applicable): Letter Writing Campaign	
The travel is necess	ary for the implementation of the project funding the travel.	
SUBMITTED BY:	Signature Dasappo	4105117 Date
APPROVED BY:	Principal/Supervisor	4-25-17 Date
	Associate Superintendent/Superintendent	4/26/17 Date

WILL THE DISTRICT RECEIVE REIMBURSEMENT? $\underline{\mathbf{No}}$

IF SO, SOURCE & AMOUNTS:

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SCHOOL: <u>CDO</u>		
ESTIMATED NUMBER OF S	TUDENTS: 1	
NAME OF SCHOOL GROUP	/CLUB/ENTITY: HOSA-Bio	<u>sciences</u>
STAFF ADVISOR(S)/CHAPE	RONES: <u>Carolyn Zeiher</u>	
ABSENCE: # Days 6 Sub Re	equired: Yes No	# of School Days Missed $\underline{0}$
		A National Leadership Conference (NLC) who placed during the state competition.
DESTINATION OF TRAVEL:	Orlando, FL	
	STUDENTS: HOSA NLC	is geared towards preparing future health ional development workshops.
PROPOSED METHOD OF TR ☐ District-owned vehicles Transportation approval: ☐ Other <u>Air</u>		
Are expenses paid from any of Parent Organization	the following accounts? Auxil	iary Tax Credits <u>x</u> Club Funds <u>x</u>
EXPENSES REQUE	ESTED: (OBTAIN RECEIP?	TS FOR ALL INCURRED EXPENSES)
	APPROX. COST	BUDGET CODE
Registration	\$110.00 \$550.00	<u>596-00-312-2190-282-6360</u> <u>526/850-00-100-1001-282-6892</u>
Transportation	\$550.00 \$550.00	<u>596-00-312-2190-282-6582</u> <u>526/850-00-100-1001-282-6519</u>
Meals	\$385.00 \$385.00	<u>596-00-312-2190-282-6582</u> <u>526/850-00-100-1001-282-6892</u>
Lodging	\$1,074.00 \$1,074.00	<u>596-00-312-2190-282-6582</u> <u>526/850-00-100-1001-282-6892</u>
Substitutes		

\$4678.00

VILL THE DISTRICT RECEIVE REIMBURSEMENT? <u>No</u> F SO, SOURCE & AMOUNTS:
OW ARE CHAPERONE EXPENSES PAID? CTE/JTED
COST TO EACH STUDENT \$ 909.80
IOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME ROVISIONS)? <u>Club funds</u>
UNDING SOURCE(S): CTE/JTED, Tax credit, Club funds
UNDRAISING ACTIVITIES PLANNED (If applicable):
The travel is necessary for the implementation of the project funding the travel.
SUBMITTED BY: Carshy Fut \ Signature \ Date \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
APPROVED BY: Fau July 4/34/17 Principal/Supervisor Date
Associate Superintendent/Superintendent Date

AMPHITHEATER PUBLIC SCHOOLS STAFF/STUDENT TRAVEL REQUEST

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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>CDO</u>			
ESTIMATED NUMBE	ER OF STUDENTS: 5		
NAME OF SCHOOL O	GROUP/CLUB/ENTITY:	FCCLA - Early	· Childhood
STAFF ADVISOR(S)/0	CHAPERONES: <u>Jennif</u> e	er Atteberry-Pie	<u>erpont</u>
ABSENCE: # Days 7	Sub Required: Yes	⊠ No #	of School Days Missed 0
ACTIVITY / EVENT /	PURPOSE OF TRAVEL:	FCCLA Nation	nal Leadership Conference
DESTINATION OF TR	RAVEL: <u>Nashville, TN</u>		
			ill attend national leadership training and
PROPOSED METHOD ☐ District-owned vehi Transportation approval ☐ Other plane		N:	
Are expenses paid from Parent Organization		unts? Auxiliary	Tax Credits <u>X</u> Club Funds <u>X</u>
EXPENSES I	REQUESTED: (OBTAI	N RECEIPTS F	OR ALL INCURRED EXPENSES)
	APPROX. COST	•	BUDGET CODE
Registration	\$290.00 \$1,450.00		<u>400-17-325-2190-282-6360</u> <u>526/850-00-100-1001-282-6892</u>
Transportation	\$670.00 \$2,680.00		<u>400-17-325-2190-282-6519</u> <u>400-17-325-2190-282-6519</u>
Meals	<u>\$343.00</u> self paid		<u>596-00-325-2190-282-6582</u> ———
Lodging	\$1320.00 \$1320.00		<u>400-17-325-2190-282-6582</u> <u>596-00-325-2190-282-6892</u>
Substitutes			

WILL THE DISTRICT RECEIVE REIMBURSEMENT? No IF SO, SOURCE & AMOUNTS:	
HOW ARE CHAPERONE EXPENSES PAID? CTE Funds	
COST TO EACH STUDENT \$ 663.00	
HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUIPROVISIONS)? CTE Funds and Scholarships	DENTS (LOW FAMILY INCOME
FUNDING SOURCE(S): CTE Funds, Club Funds, Tax Credits	
FUNDRAISING ACTIVITIES PLANNED (If applicable):	
	,
The travel is necessary for the implementation of the project funding the travel	•′
SUBMITTED BY Signature 1	4-21-17 Date
APPROVED BY: Principal/Supervisor	4/21/17 Date
Man Tela Associate Superintendent/Superintendent	<u>4/36/17</u> 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	Julie Valenzuela	SCHOOL: La Cima Middle
	<u> </u>		Department (opt.):
		Da	ATE(S): <u>July 8, 9, 10, 11, 2017</u>
ACTIVITY/EVEN	T: National Principals	s Conference	
LOCATION: PI	iladelphia, Pennsylva	ania	
ABSENCE: #	Days <u>4</u> Sub Requir	red: No	# of School Days Missed 2
EXPENSES REQU	ESTED: (OBTAIN R	ECEIPTS FOR ALL INCU	JRRED EXPENSES)
	<u>APPROX</u>	IMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$,1500</u>		<u>100-17-100-2210-165-6360</u>
Transporta	tion <u>\$1,400</u>	Mode <u>airline, gro</u>	und 100-17-100-2210-165-6582
Rental Car	Januari Carantes and		
Meals	<u>\$378</u>		<u>100-17-100-2210-165-6582</u>
Lodging	<u>\$2,000</u>		<u>100-17-100-2210-165-6582</u>
Substitutes			
TOTAL	<u>\$5,278</u>		
The District will	(or) will not ⊠ rece	sive reimbursement from ou	utside sources.
Purpose of travel: P	rofessional developm	ent at the National Princ	ipals Conference.
professional capaci health, social-emot	ty (peer coaching, me onal learning, and yo tudent learning, Froi	entoring, leadership develouth development), conne outh development), conne on this conference the Am	development will occur in the following areas: opment), elevating student efficacy (mental cting positive climate-culture-community, and phitheater High School Feeder pattern (AHS, ccross our schools and for our students & staff.
The travel is necessa	ry for the implementat	tion of the project funding	the travel.
	ature Aristine cipal/Supervisor Municipal) Sullive	Date 4/19/17 Date 4/86/17

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>	niel <u>Schneider</u>	Depa	DL: <u>AHS</u> artment (opt.): (S): 7/23/2017-7/27/2017
	P Summer Institute for A y Creek High School - 93	-	<u>A</u> enwood Village, CO 80111
ABSENCE: # Day	s <u>5</u> Sub Required: \(\subseteq \)	es ⊠No	# of School Days Missed 0
EXPENSES REQUEST	ED: (OBTAIN RECEIPT	S FOR ALL INCURRE	ED EXPENSES)
	<u>APPROXIMATE</u>		BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$ 675.00</u>	-	103.17.100.2210.281.6360
Transportation	<u>\$ 231.40</u>	Mode <u>Plane</u>	103.17.100.2210.281.6582
Rental Car			
Meals	<u>\$ 160.00</u>	<u>:</u>	103.17.100.2210.281.6582
Lodging	<u>\$ 834.25</u>	-	103.17.100.2210.281.6582
Substitutes		-	
TOTAL	<u>\$ 1900.65</u>		
The District will (or) will not receive reimbursement from outside sources. Purpose of travel: Attend the AP Summer Institute for AP Computer Science A, which will be taught for the first time at Amphi High and is following a year where significant changes have been made to the AP Exam by adding a lab requirement to the course.			
Outcomes and academic benefits to students and staff: The teacher will receive training on instructional best- practices as taught by a veteran AP Computer Science teacher who helped pilot the new requirements for the AP Exam. The teacher will also be exposed to strategies and recommendations to best prepare students for the multiple choice AP Exam. Using these strategies, students will have the best possible chance of passing the AP Exam and earning college credit as a result of their hard work and effort.			
In	Supervisor Supervisor Superintendent/Superinte		1/10/7 Date 1/10/17 Date Date 1/10/17

AMPHITHEATER PUBLIC SCHOOLS STAFF TRAVEL/CONFERENCE REQUEST

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EMPLOYEE(S): Ma	ry Beth Santillan	SCHOOL: District Offices
		Department (opt.): State & Federal
		DATE(S): <u>10/27-31/2017</u>
ACTIVITY/EVENT: 20	017 National Association for the Edu	cation of Homeless Children and Youth Conference
LOCATION: Chicag	go, IL	
ABSENCE: # Day	s 5 Sub Required: Yes No	# of School Days Missed 3
EXPENSES REQUEST	ED: (OBTAIN RECEIPTS FOR ALL	INCURRED EXPENSES)
	APPROXIMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$700</u>	270.17.100.2579.510.6360
Transportation	<u>\$550</u> Mode <u>Air</u>	100.17.100.2579.510.6582
Rental Car	·	· · · · · · · · · · · · · · · · · · ·
Meals	<u>\$212.75</u>	100.18.100.2579.510.6582
Lodging	\$850	100.18.100.2579.510.6582
Substitutes		
TOTAL	<u>\$2,312.75</u>	
The District will [] (or) will not X receive reimbursement t	from outside sources
` '		
Purpose of travel: <u>To at</u>	tend the National Association for the	Education of Homeless Children and Youth
policies affecting homel	less students. This will increase the l	ney-Vento Liaison will gain information on laws and iaison's knowledge about federal efforts to combat
homelessness and learn	about resources available to assist the	he homeless population within our district.
Submitted by: (Darlene Mansouri 1/Supervisor	<u>4.20.17</u> Date
	Darlene Mansouri	4.20:17 Date 4.26/17
Principa ()	l/Supervisor	Date
Th	und film	
Associat	e Superintendent/Superintendent	Date