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	OOL: <u>CDO</u>		
ESTI	MATED NUMBER	OF STUDENTS: 30	
NAM	E OF SCHOOL GF	COUP/CLUB/ENTITY: Football	
	F ADVISOR(S)/CI <u>Catterson</u>	HAPERONES: <u>Dustin Peace, Eric</u>	Rossi, Jody Bayse, Josh Robbins, Andy Bayse,
ABSE	NCE: # Days <u>4</u> S	Sub Required: 🗌 Yes 🛮 🖂 No	# of School Days Missed <u>0</u>
АСТГ	VITY / EVENT / P	URPOSE OF TRAVEL: 7 on 7 and F	Big Man competition
DEST	INATION OF TRA	VEL: San Diego, CA	
ACAL	CS OF TRAVEL: <u>6/</u> DEMIC BENEFITS <u>etitions at USD.</u>		the travel is to compete in 7 on 7 and lineman
PROPOSED METHOD OF TRANSPORTATION: District-owned vehicles Transportation approval: Other Adobe Transportation Vans, personal parent vehicles Are expenses paid from any of the following accounts? Auxiliary no Tax Credits yes Club Funds yes Parent Organization no			
	EXPENSES RI	EQUESTED: (OBTAIN RECEIPTS	S FOR ALL INCURRED EXPENSES)
		APPROX. COST	BUDGET CODE
	Registration	<u>\$720.00</u>	<u>526/850-00-100-1001-282-6892</u>
	Transportation \$2,200.00 (vans/gas)		526/850-00-100-1001-282-6519
	Meals	<u>\$3,000.00</u>	<u>526/850-00-100-1001-282-6892</u>
	Lodging	<u>\$535.00</u>	526/850-00-100-1001-282-6892
	Substitutes		
	TOTAL	\$6,455.00	

WILL THE DISTRIC IF SO, SOURCE & A	CT RECEIVE REIMBURSEI AMOUNTS:	MENT? <u>no</u>	
HOW ARE CHAPEI	RONE EXPENSES PAID? <u>R</u>	oom and food will be paid	from club account.
COST TO EACH ST	UDENT \$ Students will be	required to fundraise \$25	0 each.
			DENTS (LOW FAMILY INCOME anners will be used for kids to
FUNDING SOURCE	E(S): club money and tax	credit account	
	TIVITIES PLANNED (If app the upcoming season	licable):	
SUBMITTED BY: _	Mil		519/19
SOBINITIED DI	Signature		Date
APPROVED BY: _	Principal/Supervisor	•	Date
	Muhael By	an	rolzla

Associate Superintendent/Superintendent

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): Et	hnee Taylor	SCHOOL: Cross Middle			
	NAME OF THE PARTY	Department (opt.):			
MINISTER CO.		DATE(S): <u>6/17/19 - 6/19/19</u>			
ACTIVITY/EVENT: <u>V</u>	V.E.B. (Where Everybody Belongs) B	The state of the s			
LOCATION: <u>Teme</u>	cula, CA				
ABSENCE: # Day	ys <u>3</u> Sub Required: □Yes ⊠No	# of School Days Missed 0			
EXPENSES REQUEST	TED: (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>\$1,895.00</u>	<u>530-00-100-2210-167-6360</u>			
Transportation	Mode <u>Perso</u>	onal car 530-00-100-2210-167-6582			
Rental Car					
Meals	Included				
Lodging	<u>Included</u>	· · · · · · · · · · · · · · · · · · ·			
Substitutes					
TOTAL	<u>\$2,295.50</u>				
The District will (or) will not receive reimbursement from outside sources.					
Purpose of travel: This is the W.E.B. training conference to allow for a new staff member to continue our W.E.B. program at Cross Middle School.					
arrival to a middle school throughout the year to our 8th graders, connec	ool campus. W.E.B. leaders run the on the least with their social and emotional ting our campus to the broader comm	. is a transition program that supports 6 th graders' orientation for the 6 th graders and host events for them growth. W.E.B. also serves as a leadership class for nunity through acts of service.			
The travel is necessar	for the implementation of the project fu	anding the travel.			
Submitted by: 5-70-19					
Signa	iture	Date			
tto.	MW - Newwood	<u>5-30-19</u>			
rync	Muhan Byan	Bate (0/3)13			
Assoc	iate 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>Juli</u>	Nicholson SCHOOL: IRHS		
		Department (opt.): <u>Interscholastic/CTE</u>	
		DATE(S): <u>June 23-27, 2019</u>	
A COUNTY OF THE NAME OF THE PARTY OF THE PAR			
	ational Athletic Training Association		
LOCATION: Manda	alay Bay Convention Center 3950 Las	Vegas Blvd. Las Vegas, NV 89119	
ABSENCE: # Days	s <u>5</u> Sub Required: \(\subseteq Yes \(\subseteq No	# of School Days Missed 0	
EXPENSES REQUEST	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>\$250.00</u>	001-00-620-2579-512-6360	
Transportation	Mode carpoo	ling	
Rental Car			
Meals	<u>\$229.50</u>	001-00-620-2579-512-6582	
Lodging	<u>\$1,760.00</u>	001-00-620-2579-512-6582	
Substitutes			
TOTAL	<u>\$2,239.50</u>		
The District will [(or)) will not 🛛 receive reimbursement fro	m outside sources.	
Purpose of travel: Annu	al conference on current trends and p	ractices for Athletic Trainers.	
and updated research f		nual conference will provide training on current issues 's with continuinng education units that must be as per job requirements.	
	or the implementation of the project fund		
Submitted by:			
Signatur	g ' 0 - 00	Date	
	UDSI CALL	6/3/19	
Principa	NSupervisor Byan	Date	
'M'	when enjoy	U13119	

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): J	ayne <u>Huseby</u>	SCH	OOL: District Offices
		De	epartment (opt.): Language Acquisition
	NAME OF TAXABLE PARTY O	DAT	E(S): October 14-19,2019
ACTIVITY/EVENT:	WIDA (World-class I	nstructional Design and	Assessment) Annual Conference
LOCATION: Rhoo	de Island Convention	<u>Center - Providence, RI</u>	
ABSENCE: # Da	ays <u>6</u> Sub Required:	∐Yes ⊠No	# of School Days Missed 0
EXPENSES REQUES	STED: (OBTAIN REC	EIPTS FOR ALL INCUR	RED EXPENSES)
	APPROXIM	ATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$700</u>		<u>1911910022105116360</u>
Transportation	on <u>\$750</u>	Mode <u>Plane/Taxi</u>	<u>1912010022105116582</u>
Rental Car			
Meals	<u>\$241.50</u>		<u>1912010022105116582</u>
Lodging	<u>\$600</u>		<u>1912010022105116582</u>
Substitutes			
TOTAL	<u>\$2291.50</u>		
The District will 🗍 (a	or) will not 🗍 receive	reimbursement from outs	ide sources.
`	,		
1			nnovative classroom strategies for teaching lement in their classrooms
			rovement in the ELD classroom as well as now a 2 hour block instead of a 4 hour block
·	for the implementation	of the project funding the	5/12/10
Submitted by: Signat	ure		Date
	Darlene Manson	uri	5/22/19
Princi	Darlere Manson pal/Supervisor Mulvael B	yan	Date '
	iate Superintendent/Sup	<i>¶</i> :	<u>(01319</u> Date
ASSUC	rare paherimenaemoni	JOI III CONGOUNT	Date