

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: 6

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

STAFF ADVISOR(S)/CHAPERONES: Bob and Cathy Cramb

ABSENCE: # Days 5 Sub Required: Yes No # of School Days Missed 3

ACTIVITY / EVENT / PURPOSE OF TRAVEL: Odyssey of the Mind World Finals

DESTINATION OF TRAVEL: Michigan State University

DATES OF TRAVEL: 5/22/13 - 5/26/13

ACADEMIC BENEFITS TO STUDENTS: 21st Century Skills - Students will practice problem solving and creativity in a global environment.

PROPOSED METHOD OF TRANSPORTATION:

District-owned vehicles

Transportation approval: _____

Other Air and local 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>4440.00</u>	<u>850/525/526-00-100-1001-282-6892</u>
Transportation	<u>5200.00</u>	<u>850/525/526-00-100-1001-282-6519</u>
Meals	_____	_____
Lodging	_____	_____
Substitutes	_____	_____
TOTAL	<u>9640.00</u>	

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

HOW ARE CHAPERONE EXPENSES PAID? no

COST TO EACH STUDENT \$ 1606.00 for registration and transportation, additional shared costs include 500.00 shipping costs and 800.00 trip expenses, these are not show in the list above.

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? requests will be made to Student Government and Site Council

FUNDING SOURCE(S): REACH Program, Oro Valley Rotary, tax credit donations from parents and community members, CDO Site Council, club funds

FUNDRAISING ACTIVITIES PLANNED (If applicable):
Odyssey team workshop (completed), tax credit drive

SUBMITTED BY: Cymmy DeBoach 4/10/13
Signature Date

APPROVED BY: Maria Lopez 4/10/13
Principal/Supervisor Date

Jim Hill 4/15/13
Associate Superintendent/Superintendent Date

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SCHOOL: AHS

ESTIMATED NUMBER OF STUDENTS: 14

NAME OF SCHOOL GROUP/CLUB/ENTITY: Boys Basketball

STAFF ADVISOR(S)/CHAPERONES: Ben Hurley, Ryan Montijo, Joey Bernis

ABSENCE: # Days 3 Sub Required: Yes No # of School Days Missed 0

ACTIVITY / EVENT / PURPOSE OF TRAVEL: Point Loma University Tournament - Varsity Basketball Tournament/Competition

DESTINATION OF TRAVEL: Point Loma University/ San Diego, CA.

DATES OF TRAVEL: 6/14/2013 - 6/16/2013

ACADEMIC BENEFITS TO STUDENTS: Extra-curricular

PROPOSED METHOD OF TRANSPORTATION:

District-owned vehicles

Transportation approval: _____

Other Rental Vans

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>350.00</u>	<u>850-00-620-3400-281-6892</u>
Transportation	<u>1200.00</u>	<u>850-00-620-3400-281-6519</u>
Meals	<u>600.00</u>	<u>850-00-620-3400-281-6892</u>
Lodging	<u>1700.00</u>	<u>850-00-620-3400-281-6892</u>
Substitutes	_____	_____
TOTAL	<u>3850.00</u>	

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

HOW ARE CHAPERONE EXPENSES PAID? Club account

COST TO EACH STUDENT \$ 0.00

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

FUNDING SOURCE(S): Summer Sponsors, FT fundraiser

FUNDRAISING ACTIVITIES PLANNED (If applicable):

SUBMITTED BY: Ben Hurley 4/1/13
Signature Date

APPROVED BY: Samuel V. Gato 4/1/13
Principal/Supervisor Date

Joe DeL 4/9/13
Associate Superintendent/Superintendent Date

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SCHOOL: IRHS

ESTIMATED NUMBER OF STUDENTS: 10

NAME OF SCHOOL GROUP/CLUB/ENTITY: Girls Basketball

STAFF ADVISOR(S)/CHAPERONES: Amanda N. Simpson, Holly Broberg, Amanda Kirchoffer, and Mackenzie Greer

ABSENCE: # Days 4 Sub Required: Yes No # of School Days Missed 0

ACTIVITY / EVENT / PURPOSE OF TRAVEL: Point Loma Team Camp

DESTINATION OF TRAVEL: Point Loma University, San Diego, CA

DATES OF TRAVEL: June 20-23, 2013

ACADEMIC BENEFITS TO STUDENTS: Students will have the opportunity to visit different college campuses in the Southern California area; as well as speak with college representatives about the requirements and benefits of attending college.

PROPOSED METHOD OF TRANSPORTATION:

District-owned vehicles

Transportation approval: _____

Other Rental vans

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>\$295</u>	<u>booster club</u>
Transportation	<u>\$600</u>	<u>booster club</u>
Meals	<u>\$1,000</u>	<u>Student paid</u>
Lodging	<u>\$1,500</u>	<u>850-00-100-3400-280-6892</u>
Substitutes	_____	_____

TOTAL \$3,695.00

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


HOW ARE CHAPERONE EXPENSES PAID? booster club

COST TO EACH STUDENT \$ Apx. \$100

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? booster club will offer scholarships

FUNDING SOURCE(S): boosters, club account

FUNDRAISING ACTIVITIES PLANNED (If applicable):
Summer camp

SUBMITTED BY:  3-20-13
Signature Date

APPROVED BY:  3/20/13
Principal/Supervisor Date

 4/9/13
Associate Superintendent/Supervisor Date

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SCHOOL: CDO

ESTIMATED NUMBER OF STUDENTS: 3

NAME OF SCHOOL GROUP/CLUB/ENTITY: FCCLA- Early Childhood

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

ABSENCE: # Days 7 Sub Required: Yes No # of School Days Missed 0

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

DESTINATION OF TRAVEL: Nashville, TN

DATES OF TRAVEL: July 5-11, 2013

ACADEMIC BENEFITS TO STUDENTS: To offer these students more leadership skills and provide the opportunity to compete at a national level.

PROPOSED METHOD OF TRANSPORTATION:

District-owned vehicles

Transportation approval: _____

Other _____

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>315.00</u>	<u>400.13.270.2190.282.6360</u>
	<u>945.00</u>	<u>850/526-00-100-1001-282-6892</u>
Transportation	<u>726.00</u>	<u>400.13.270.2190.282.6582</u>
	<u>2,178.00</u>	<u>850/526-00-100-1001-282-6519</u>
Meals	<u>343.00</u>	<u>400.13.270.2190.282.6582</u>
	<u>1,029.00</u>	<u>850/526-00-100-1001-282-6892</u>
Lodging	<u>953.00</u>	<u>400.13.270.2190.282.6582</u>
	<u>954.00</u>	<u>850/526-00-100-1001-282-6892</u>
Substitutes	_____	_____

TOTAL

7,443.00

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

HOW ARE CHAPERONE EXPENSES PAID? CTE Funds

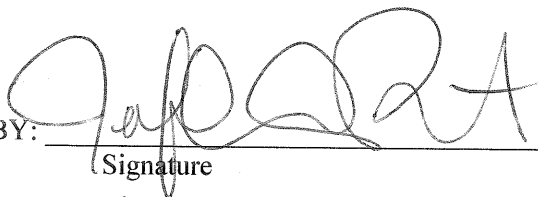
COST TO EACH STUDENT \$ 1,500.00

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? Tax Credits, CTE Funds, Donations, and JTED Funds

FUNDING SOURCE(S): CTE Funds, CTSO Funds, Tax Credits, JTED Funds

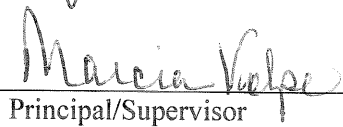
FUNDRAISING ACTIVITIES PLANNED (If applicable):
Dorado Cups, Donations

SUBMITTED BY: _____


Signature

4-3-13
Date

APPROVED BY: _____


Principal/Supervisor

4/4/13
Date


Associate Superintendent/Superintendent

4/9/13
Date

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SCHOOL: CDO

ESTIMATED NUMBER OF STUDENTS: 48

NAME OF SCHOOL GROUP/CLUB/ENTITY: Football

STAFF ADVISOR(S)/CHAPERONES: Dustin Peace, Rick Werbylo, Aaron Nymeyer, Tommy Steele, Rick Berkbigler, John Valljeos, Jody Bayse,

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

ACTIVITY / EVENT / PURPOSE OF TRAVEL: Team camp to Irvine, CA

DESTINATION OF TRAVEL: Irvine, CA

DATES OF TRAVEL: 7/23/13 - 7/28/13

ACADEMIC BENEFITS TO STUDENTS: The purpose of the team camp is to develop leadership and team bonding skills. In addition, students will learn new techniques and athletic movements.

PROPOSED METHOD OF TRANSPORTATION:

District-owned vehicles

Transportation approval: _____

Other Charter Bus

Are expenses paid from any of the following accounts? Auxiliary no Tax Credits no Club Funds yes
Parent Organization no

EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

	APPROX. COST	BUDGET CODE
Registration	<u>13.900</u>	<u>850-00-100-3400-282-6892</u>
Transportation	<u>3,500</u>	<u>850-00-100-3400-282-6519</u>
Meals	<u>1,500</u>	<u>850-00-100-3400-282-6892</u>
Lodging <u>included w/ registration</u>		<u>850-00-100-3400-282-6892</u>
Substitutes	_____	_____

TOTAL

18,900

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

HOW ARE CHAPERONE EXPENSES PAID? Four coaches will be free and the rest will be paid from club account.

COST TO EACH STUDENT \$ Students will be required to fundraise 400 each.

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? Fundraising activities for our program ads and banners will be used for kids to raise the money.

FUNDING SOURCE(S): club money

FUNDRAISING ACTIVITIES PLANNED (If applicable):

Selling program ads for the upcoming season.
Selling banners for the upcoming season

SUBMITTED BY: _____

Signature

Date

APPROVED BY: _____

Principal/Supervisor

Date

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): Tatiana Horwitz

SCHOOL: IRHS

Department (opt.): Math

DATE(S): 07/08-12/2013

ACTIVITY/EVENT: AP Summer Institute-Advanced Placement Summer Institute in Statistics

LOCATION: Loyola University of Chicago, Chicago, IL

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

EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

	<u>APPROXIMATE COST</u>	<u>BUDGET CODE/DESCRIPTION</u>
Registration	<u>\$575.00</u>	<u>530-00-100-3400-280-6360</u>
Transportation	_____ Mode _____	<u>N/A</u>
Rental Car	_____	_____
Meals	_____	<u>N/A</u>
Lodging	_____	<u>N/A</u>
Substitutes	_____	_____
TOTAL	<u>\$575.00</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: Professional Development opportunity

Outcomes and academic benefits to students and staff: I am looking forward to teaching AP Statistics course during 2013-14 school year.

Submitted by: Tanya Horwitz 03/28/13
Signature Date

Michelle 3/28/13
Principal/Supervisor Date

John 4/15/13
Associate Superintendent/Supintendent Date

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

EMPLOYEE(S): Michael Bejarano _____
Paul DeWeerd _____
Shannon Chandler _____

SCHOOL: District Offices
Department (opt.): _____
DATE(S): 6/25/13 - 6/28/13

ACTIVITY/EVENT: International Baccalaureat Workshop

LOCATION: Tahoe City, CA

ABSENCE: # Days 4 Sub Required: Yes No # of School Days Missed 2

EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

	<u>APPROXIMATE COST</u>	<u>BUDGET CODE/DESCRIPTION</u>
Registration	<u>2,520</u>	<u>140.13.100.2210.515.6360</u>
Transportation	<u>1,187</u> Mode <u>air</u>	<u>140.13.100.2210.515.6582</u>
Rental Car	<u>372</u>	<u>140.13.100.2210.515.6582</u>
Meals	_____	_____
Lodging	<u>2,883 (includes meals)</u>	<u>140.13.100.2210.515.6582</u>
Substitutes	_____	_____
TOTAL	<u>\$6,962</u>	

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

Purpose of travel: To gain an understanding of the basic philosophy and curricular model of the programme and standards and practices.

Outcomes and academic benefits to students and staff: Preparation for college and groundwork for the extensive research of the theory of knowledge done at the higher levels of study.

Submitted by: Michael Bejarano _____ 4/16/13
Signature Date

Principal/Supervisor _____ Date _____
Shannon Chandler _____ 4/14/13
Associate Superintendent/Superintendent Date

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

EMPLOYEE(S): Marc Kaufman

SCHOOL: CDO
 Department (opt.): IB
 DATE(S): June 24-28, 2013

ACTIVITY/EVENT: International Baccalaureate Category 2 Workshop

LOCATION: St. Pete Beach, Florida

ABSENCE: # Days 5 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>850.00</u>	<u>140-13-100-2210-510-6360</u>
Transportation	<u>750.00</u> Mode <u>airline</u>	<u>140-13-100-2210-510-6582</u>
Rental Car	<u>200.00 (Ground transportation)</u>	<u>140-13-100-2210-510-6582</u>
Meals	<u>196.00</u>	<u>140-13-100-2210-510-6582</u>
Lodging	<u>750.00</u>	<u>140-13-100-2210-510-6582</u>
Substitutes	<u>0</u>	
TOTAL	<u>2746.00</u>	

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

Purpose of travel: 1) Teacher learns how to provide thoughtful and purposeful inquiry into different ways of knowing, and into different kinds of knowledge, 2) TOK is composed almost entirely of questions. The most central of these is "How do we know?" Teachers provide ways to help students become aware of the interpretative nature of knowledge, including personal ideological biases.

Outcomes and academic benefits to students and staff: Outcomes and benefits to students is a deeper understanding and success on the experimental design of the specific tasks required for academic success.

Submitted by: Marc Kaufman 4/12/13
 Signature Date
Marin Kope 4/15/13
 Principal/Supervisor Date
Ma Bell 4/15/13
 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): Laonna Davis _____

SCHOOL: CDO
 Department (opt.): IB
 DATE(S): June 24-28, 2013

ACTIVITY/EVENT: International Baccalaureate Training

LOCATION: Montezuma, New Mexico

ABSENCE: # Days 5 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>\$1419.00</u>	<u>140-13-100-2210-510-6360</u>
Transportation	<u>\$ 850.00</u>	Mode <u>Air/Shuttle</u> <u>140-13-100-2210-510-6582</u>
Rental Car	_____	_____
Meals	<u>\$ 49.00</u>	<u>140-13-100-2210-510-6582</u>
Lodging	_____	_____
Substitutes	_____	_____
TOTAL	<u>\$2318.00</u>	

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

Purpose of travel: The teacher will receive training to become a fully certified International Baccalaureate teacher. Registration fee includes meals and lodging.

Outcomes and academic benefits to students and staff: The teacher will be able to work in Canyon del Oro's International Baccalaureate Programme.

Submitted by: Laonna Davis _____ Date _____
 Signature
Marcia Kasper _____ Date 4/12/13
 Principal/Supervisor
Jan Kell _____ Date 4/10/13
 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): Toru Tagawa _____

SCHOOL: CDO
 Department (opt.): IB
 DATE(S): 7/8-7/11/2013

ACTIVITY/EVENT: International Baccalaureate Training

LOCATION: New York, New York

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>
		(Note: Tax credit contributions are District funds and require a budget code.)
Registration	\$ <u>960</u>	<u>140-13-100-2210-510-6360</u>
Transportation	\$ <u>200</u> Mode <u>Taxis</u>	<u>140-13-100-2210-510-6582</u>
Rental Car	\$ <u>0</u>	_____
Meals	\$ <u>236</u>	<u>140-13-100-2210-510-6582</u>
Lodging	\$ <u>750</u>	<u>140-13-100-2210-510-6582</u>
Substitutes	\$ <u>0</u>	_____
TOTAL	\$<u>2,146</u>	

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

Purpose of travel: The teacher will receive training to become a fully certified International Baccalaureate teacher. Teacher will be able to administer internal and external assessments to meet IB requirements in music. Registration fee does not include meals and lodging.

Outcomes and academic benefits to students and staff: The teacher will be able to work in Canyon del Oro's International Baccalaureate Programme.

Submitted by: Toru Tagawa _____ Date _____
 Signature
Marcia Volpe _____ Date 7/15/13
 Principal/Supervisor
[Signature] _____ Date 7/15/13
 Associate Superintendent/Superintendent

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

EMPLOYEE(S): Grant Studer _____

SCHOOL: CDO
 Department (opt.): IB
 DATE(S): 7/17-21/2013

ACTIVITY/EVENT: International Baccalaureate Training

LOCATION: Montezuma, New Mexico

ABSENCE: # Days 5 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>\$1,169</u>	<u>140-13-100-2210-510-6360</u>
Transportation	<u>\$ 600</u> Mode <u>Car</u>	<u>140-13-100-2210-510-6582</u>
Rental Car	<u>\$ 0</u>	_____
Meals	<u>\$ 50</u>	<u>140-13-100-2210-510-6582</u>
Lodging	<u>\$ 0</u>	_____
Substitutes	<u>\$ 0</u>	_____
TOTAL	<u>\$1,819</u>	

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

Purpose of travel: The teacher will receive training to become a fully certified International Baccalaureate teacher. Registration fee includes meals and lodging.

Outcomes and academic benefits to students and staff: The teacher will be able to work in Canyon del Oro's International Baccalaureate Programme.

Submitted by: Grant Studer _____ 4/12/13
 Signature Date
Marcia Holpe _____ 4/15/13
 Principal/Supervisor Date
[Signature] _____ 4/17/13
 Associate Superintendent/Supervisor Date

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

EMPLOYEE(S): Cris Cisco
Michelle Barcanic

SCHOOL: CDO
Department (opt.): _____
DATE(S): July 18 - 21, 2013

ACTIVITY/EVENT: IB Conference of the Americas

LOCATION: New Orleans, Louisiana

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> (Note: Tax credit contributions are District funds and require a budget code.)
Registration <u>\$2248.00</u>	<u>140-13-100-2210-510-6360</u>
Transportation <u>\$1600.00</u> Mode <u>airline</u>	<u>140-13-100-2210-510-6582</u>
Rental Car <u>\$ 200.00 (Ground transportation)</u>	<u>140-13-100-2210-510-6582</u>
Meals <u>\$ 392.00</u>	<u>140-13-100-2210-510-6582</u>
Lodging <u>\$ 690.00</u>	<u>140-13-100-2210-510-6582</u>
Substitutes _____	_____
TOTAL <u>\$5130.00</u>	

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

Purpose of travel:

To increase our understanding of IB educators from North, Central, and South America and the world. Discover new ideas to further develop CDO's IB programme.

Outcomes and academic benefits to students and staff: Outcomes and benefits to students and teachers is a deeper understanding and success on implementing the IB Programme for academic success.

Submitted by:

Cris Cisco
Signature

4/12/13
Date

Marvin Kelp
Principal/Supervisor

4/15/13
Date

Marvin Kelp
Associate Superintendent/Supervisor

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): Sonya Gauna _____

SCHOOL: CDO

Department (opt.): IB

DATE(S): July 22-26, 2013

ACTIVITY/EVENT: International Baccalaureate Training

LOCATION: Montezuma, New Mexico

ABSENCE: # Days 5 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>\$1419.00</u>		<u>140-13-100-2210-510-6360</u>
Transportation	<u>\$ 850.00</u>	Mode <u>Air/Shuttle</u>	<u>140-13-100-2210-510-6582</u>
Rental Car	_____		_____
Meals	<u>\$ 49.00</u>		<u>140-13-100-2210-510-6582</u>
Lodging	_____		_____
Substitutes	_____		_____
TOTAL	<u>\$2318.00</u>		

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

Purpose of travel: The teacher will receive training to become a fully certified International Baccalaureate teacher. Registration fee includes meals and lodging.

Outcomes and academic benefits to students and staff: The teacher will be able to work in Canyon del Oro's International Baccalaureate Programme.

Submitted by: Sonya Gauna _____ Date _____
 Signature
Marcia Valdez _____ Date 4/12/13
 Principal/Supervisor
John Kelly _____ Date _____
 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): Patrick Nelson _____

SCHOOL: District Offices
 Department (opt.): Superintendent
 DATE(S): June 25-28, 2013

ACTIVITY/EVENT: 2013 American Association of School Administrators Summer Leadership Institute

LOCATION: Savannah, GA

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>
			(Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$399.00</u>		<u>140-13-100-2210-510-6360</u>
Transportation	<u>\$800.00</u>	Mode <u>Airfare</u>	<u>140-13-100-2210-510-6582</u>
Rental Car	<u>\$200.00</u>		<u>140-13-100-2210-510-6582</u>
Meals	<u>\$242.00</u>		<u>140-13-100-2210-510-6582</u>
Lodging	<u>\$740.00</u>		<u>140-13-100-2210-510-6582</u>
Substitutes	_____		_____
TOTAL	<u>\$2,381.00</u>		

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

Purpose of travel: To join experts and discuss teacher/administrator evaluations, assessment/accountability, school safety and security and more.

Outcomes and academic benefits to students and staff: To prepare for the implementation of Common Core and its assessment, and refine our updated security plan.

Submitted by: Patrick Nelson _____ 4/16/2013
 Signature Date

 Principal/Supervisor Date
Joe Jela _____ 4/14/13
 Associate Superintendent/Supervisor 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): Laurie Sheber, Brockton Lange, Janae Renteria, SCHOOL: AHS
Ben Bultman, Carrie Bejarano Department (opt.): _____
 DATE(S): 7/14/13-7/17/13

ACTIVITY/EVENT: Avid Summer Institute
 LOCATION: San Antonio, TX

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>
			(Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>3,345.00</u>		<u>100.13.100.2210.281.6360</u>
Transportation	<u>2,425.00</u>	Mode <u>air</u>	<u>100.13.100.2210.281.6582</u>
Rental Car	<u>00.00</u>		<u>100.13.100.2210.281.6582</u>
Meals	<u>980.00</u>		<u>100.13.100.2210.281.6582</u>
Lodging	<u>1,320.00</u>		<u>100.13.100.2210.281.6582</u>
Substitutes	<u>NA</u>		<u>NA</u>
TOTAL	<u>\$8,070.00</u>		

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

Purpose of travel: AVID (Advancement Via Individual Determination) training for our AVID Site TEAM to support the implementation of the program at our site. This will include our site coordinator, AVID elective teachers, and content area teachers. This program will be put in place at AHS to coordinate with the AVID programs currently in place at AMS & La Cima

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 at our site. 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 address how to grant equitable access to rigorous curricula for all students.

Submitted by: Laurie Sheber _____ 4/8/13
 Signature Date

J. _____ _____ 4/8/13
 Principal/Supervisor Date

Jan Bejarano _____ 4/15/13
 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): Michael McConnell Kelly Smith
Mandi Cordell Jean Shivers
Teacher TBD

SCHOOL: Walker
 Department (opt.): _____
 DATE(S): July 14-17, 2013

ACTIVITY/EVENT: AVID Summer Institute

LOCATION: San Antonio, TX

ABSENCE: # Days 5 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>\$2,676.00</u>		<u>100-13-100-2210-112-6360</u>
Transportation	<u>\$2,700.00</u>	Mode <u>Air</u>	<u>100-13-100-2210-112-6582</u>
Rental Car	<u>0</u> _____		
Meals	<u>\$980.00</u>		<u>100-13-100-2210-112-6582</u>
Lodging	<u>\$2,028.00</u>		<u>100-13-100-2210-112-6582</u>
Substitutes	_____		_____
TOTAL	<u>\$9,584.00</u>		

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

Purpose of travel: AVID (Advancement Via Individual Determination) Summer Institute. Teachers will be trained in the AVID program in an effort to better support students as they travel the AHS feeder pattern.

Outcomes and academic benefits to students and staff: After training, the 4th and 5th grade team will be properly trained so that they can implement the AVID program and curriculum with fidelity.

Submitted by:

Signature _____

 Principal/Supervisor

 Date
4/15/13
 Date


 Associate Superintendent/Supervisor

 Date
4/15/13
 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, Kathy Floyd, Julie Valenzuela Rob Wolf SCHOOL: AMS
MaryGrace Salamon, Jennifer Queiruga, Theresa Eckley Department (opt.): _____
Trsita Diverta,(ALT: Amanda Miller) _____ DATE(S): July 14-17, 2013

ACTIVITY/EVENT: AVID Summer Institute

LOCATION: San Antonio, TX

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>
		(Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$6,690.00</u>	<u>100-13-100-2210-166-6360</u>
Transportation	<u>\$6,800.00</u> Mode <u>Air</u>	<u>100-13-100-2210-166-6582</u>
Rental Car	_____	<u>100-13-100-2210-166-6582</u>
Meals	<u>\$2,950.00</u>	<u>100-13-100-2210-166-6582</u>
Lodging	<u>\$3000.00</u>	<u>100-13-100-2210-166-6582</u>
Substitutes	<u>000.00</u>	<u>N/A</u>
TOTAL	<u>\$19,440.00</u>	

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

Purpose of travel: AVID (Advancement Via Individual Determination) training for our AVID Site Team to support the implementation of the program at our site. This will include our Principal, Site Coordinator, AVID elective teachers, and 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 at our site. 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 address how to grant equitable access to rigorous curricula for all students.

Submitted by: Tassi Call _____ Date 4/11/13
 Signature
Tassi Call _____ Date 4/11/13
 Principal/Supervisor
[Signature] _____ Date 4/15/13
 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): Todd Jaeger _____

SCHOOL: District Offices
Department (opt.): Legal
DATE(S): 06/29/13 – 07/02/13

ACTIVITY/EVENT: School Discipline/Bully Conference

LOCATION: Las Vegas NV

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

EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

	<u>APPROXIMATE COST</u>	<u>BUDGET CODE/DESCRIPTION</u>
Registration	<u>\$425.00</u>	<u>001.00.100.2579.505.6360</u>
Transportation	<u>\$218.80</u> Mode <u>air</u>	<u>001.00.100.2579.505.6582</u>
Rental Car	<u>n/a</u> _____	
Meals	<u>\$235.00</u>	<u>001.00.100.2579.505.6582</u>
Lodging	<u>\$443.52</u>	<u>001.00.100.2579.505.6582</u>
Substitutes	<u>n/a</u> _____	
TOTAL	<u>\$ 1322.32</u>	

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

Purpose of travel: Continuing Legal Education

Outcomes and academic benefits to students and staff: This comprehensive conference brings together experts from across the country who specialize in bullying prevention and the intersection of bullying with school climate and violence issues.

Submitted by: [Signature] _____ 4-2-13
Signature Date

Principal/Supervisor _____ Date
Patrick Nelson 4-2-13
Associate Superintendent/Superintendent Date