

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): Vanessa Stinson Dana Ogden-Coons
Pippa Roulette Robbin Arthurs

SCHOOL: Keeling Elementary School

Department (opt.): _____

DATE(S): October 27-30, 2011

ACTIVITY/EVENT: ASCD Conference

LOCATION: Las Vegas, NV

ABSENCE: # Days 1 Sub Required: ☒ Yes ☐ No # of School Days Missed 1

EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

APPROXIMATE COST

BUDGET CODE/DESCRIPTION

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

Registration 1720.00

100 12 100 2210 109 6360

Transportation 1800.00

Mode Airline

100 12 100 2210 109 6582

Rental Car 250.00

100 12 100 2210 109 6582

Meals 720.00

100 12 100 2210 109 6582

Lodging 1050.00

100 12 100 2210 109 6582

Substitutes 400.00

100 12 100 2210 109 6113

TOTAL 5940.00

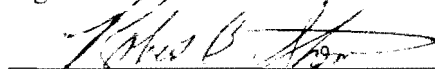
The District will ☐ (or) will not ☒ receive reimbursement from outside sources.

Purpose of travel: Attendance at ASCD conference to build and strengthen instructional skills needed in support of our School Improvement Plan. Specific training will be in differentiation of instruction, brain based learning, and working with student in high-poverty schools.

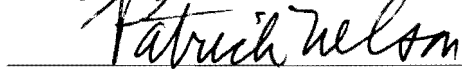
Outcomes and academic benefits to students and staff: Greater repertoire of instructional strategies will result in more effective education and greater academic growth for students.

Submitted by: _____

Signature

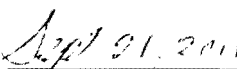


Principal/Supervisor

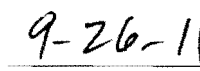


Associate Superintendent/Superintendent

Date



Date



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): Tanya Wall Kathleen (Iris) Coleman SCHOOL: AMS
Kristin McGraw Kathleen McDonnell Department (opt.): _____

DATE(S): November 6-9, 2011

ACTIVITY/EVENT: No Excuses University National Convention

LOCATION: Schaumburg, IL

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

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>\$1800.00</u>	<u>100-12-100-2210-166-6360</u>
Transportation	<u>\$1600.00</u> Mode <u>Air</u>	<u>100-12-100-2210-166-6582</u>
Rental Car	<u>N/A</u>	<u>N/A</u>
Meals	<u>\$800.00</u>	<u>100-12-100-2210-166-6582</u>
Lodging	<u>\$1200.00</u>	<u>100-12-100-2210-166-6582</u>
Substitutes	<u>\$900.00</u>	<u>100-12-100-2210-166-6113</u>
TOTAL	<u>\$6300.00</u>	

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

Purpose of travel: No Excuses University Convention will demonstrate 6 strategies to principals and teachers to coax academic success from students. It specifically targets students who have historically struggled to achieve academic proficiency.

Outcomes and academic benefits to students and staff: Students will learn how to work hard and achieve academic proficiency to attend college.

Submitted by:

Signature

Principal/Supervisor

Date

Date

Associate Superintendent/Supintendent

Date

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

EMPLOYEE(S): Bob Hehli Lourdes Oros SCHOOL: Nash
Laurie Lemieux Monique Berry-Kelley Department (opt.): _____
Jerri Nelson _____ DATE(S): November 6-9, 2011

ACTIVITY/EVENT: No Excuses National Conference

LOCATION: Schaumburg, Illinois

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

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>\$1,975</u>	<u>100-12-100-2210-110-6360</u>
Transportation	<u>\$1,750</u> Mode <u>Air</u>	<u>100-12-100-2210-110-6582</u>
Rental Car	_____	_____
Meals	<u>\$885</u>	<u>100-12-100-2210-110-6582</u>
Lodging	<u>\$1,116</u>	<u>100-12-100-2210-110-6582</u>
Substitutes	<u>\$900</u>	<u>100-12-100-2210-110-6113</u>
TOTAL	<u>\$6,626</u>	

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

Purpose of travel: The No Excuses University philosophy is the focus of our continuous school improvement efforts. Attendance at conferences is required to stay in the No Excuses University Network and the Turn Around Schools

Outcomes and academic benefits to students and staff: Creating a culture of universal achievement. Creating a collaborative environment. Aligning curriculum and instruction to the standards. Using research based assessments. Creating a data management system to analyze assessments. Providing academic and behavioral interventions to support students.

Submitted by: _____ 9-23-11
Signature Date
80100 te 9.23.11
Principal/Supervisor Date
Patricia Nelson
Associate Superintendent/Supintendent Date

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

EMPLOYEE(S): Amelia Quinn
Michelle Barcanic
Charlene Stone

SCHOOL: CDO
Department (opt.): International Baccalaureate
DATE(S): November 30-December 3, 2011

ACTIVITY/EVENT: International Baccalaureate Teacher Training

LOCATION: St. Pete Beach, Florida

ABSENCE: # Days 4 Sub Required: ☒ Yes ☐ No # of School Days Missed 3

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>\$2385.00</u>	<u>140-12-100-2210-510-6360</u>
Transportation	<u>\$1300.00</u> Mode <u>air</u>	<u>140-12-100-2210-510-6582</u>
Rental Car	<u>\$150.00 - shuttle</u>	<u>140-12-100-2210-510-6582</u>
Meals	<u>\$588.00</u>	<u>140-12-100-2210-510-6582</u>
Lodging	<u>\$621.60</u>	<u>140-12-100-2210-510-6582</u>
Substitutes	<u>\$450.00</u>	<u>140-12-100-2210-510-6113</u>
TOTAL	<u>\$5494.60</u>	

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

Purpose of travel: The teachers will receive training to become a fully certified International Baccalaureate Teachers.

Outcomes and academic benefits to students and staff: Mrs. Barcanic, Mrs. Quinn and Dr. Stone will be able to work in Canvon del Oro's International Baccalaureate Programme.

Submitted by:

Signature

9/01/11

Date

Principal/Supervisor

9/4/11

Date

Associate Superintendent/Supintendent

9-23-11

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): Patti Greenleaf Mary Swiderski SCHOOL: District Offices
Carrie Lujan Nate Benhan Department (opt.): CTE
Jennifer Atteberry Craig Baron DATE(S): 11/16/11-11/19/11
Joshua Fields

ACTIVITY/EVENT: National Association of Career and Technical Education Conference

LOCATION: St. Louis, MO

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

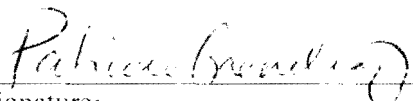
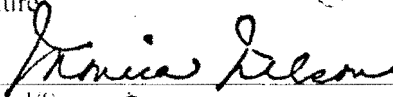
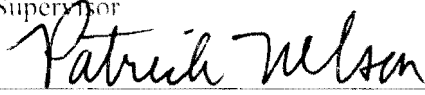
EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

<u>APPROXIMATE COST</u>		<u>BUDGET CODE/DESCRIPTION</u>
Registration	<u>\$2310</u>	<u>260-12-270-2210-***-6360</u>
Transportation	<u>\$2371.60</u> Mode <u>Airplane</u>	<u>260-12-270-2210-***-6582</u>
Rental Car	<u> </u>	<u> </u>
Meals	<u>\$1500</u>	<u>260-12-270-2210-***-6582</u>
Lodging	<u>\$2400</u>	<u>260-12-270-2210-***-6582</u>
Substitutes	<u>\$900</u>	<u>260-12-270-2210-***-6113</u>
TOTAL	<u>\$9481.60</u>	*** Corresponds to site 515, 280, 281, 282

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

Purpose of travel: To attend the National ACTE conference to learn best practices and programs of study information.

Outcomes and academic benefits to students and staff: Attendees will work with fellow CTE staff to share information which will then transfer to classroom practice.

Submitted by:  9/26/11
Signature Date
 9/26/11
Principal/Supervisor Date
 9-26-11
Associate Superintendent/ Superintendent Date

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

EMPLOYEE(S): Cathy Eiting Todd Jaeger

SCHOOL: District Offices

Department (opt.): Student Services

DATE(S): May 5-9, 2012

ACTIVITY/EVENT: 33rd Annual LRP Institute on Legal Issues of Educating Individuals with Disabilities

LOCATION: San Antonio, Texas

ABSENCE: # Days 3 Sub Required: ☐ Yes ☒ No

of School Days Missed 3

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>2500.00</u>	<u>001.00.200.2579.540.6360</u>
Transportation	<u>816.00</u> Mode <u>AIR</u>	<u>001.00.200.2579.540.6582</u>
Rental Car	<u> </u>	<u> </u>
Meals	<u>490.00</u>	<u>001.00.200.2579.540.6582</u>
Lodging	<u>1907.50</u>	<u>001.00.200.2579.540.6582</u>
Substitutes	<u>0</u> <u> </u>	
TOTAL	<u>5713.50</u>	

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

Purpose of travel: Attend the 33rd Annual LRP's National Institute on Legal Issues of Education Individuals with Disabilities

Outcomes and academic benefits to students and staff: Update special education legal requirements information

Submitted by:

Signature

9/21/11

Date

Principal/Supervisor

Date

Associate Superintendent/Superintendent

Date

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 Tassi Call SCHOOL: District Offices
Christine Sullivan Shannon Chandler Department (opt.): School Operations
Gerad Ball DATE(S): 12/2-12/7/2011

ACTIVITY/EVENT: Learning Forward (NSDC) Conference

LOCATION: Anaheim, California

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

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>3,245.00</u>	<u>140.12.100.2210.510.6360</u>
Transportation	<u>2,750.00</u> Mode <u>air</u>	<u>140.12.100.2210.510.6582</u>
Rental Car	_____	
Meals	<u>1,475.00</u>	<u>140.12.100.2210.510.6582</u>
Lodging	<u>4,352.40</u>	<u>140.12.100.2210.510.6582</u>
Substitutes	_____	_____
TOTAL	<u>11,822.40</u>	

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

Purpose of travel: To attend the National Learning Forward Conference (formerly National Staff Development Council).

Outcomes and academic benefits to students and staff: New strategies and techniques to improve student achievement.

Submitted by: Patrick Nelson 9-26-11
Signature Date

Principal/Supervisor Date

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: Wilson K-8

ESTIMATED NUMBER OF STUDENTS: 52

NAME OF SCHOOL GROUP/CLUB/ENTITY: Wilson Chamber Ensemble and Jazz Band

STAFF ADVISOR(S)/CHAPERONES: Christian Hill, Judi LeWinter, Gary Goodwin, Doug Seemans,
Cynthia Lorge, Jennifer Goldsmith, Ann Witacker, Victor Newman and Kathleen Hill

ABSENCE: # Days 3 Sub Required: ☒ Yes ☐ No # of School Days Missed 2

ACTIVITY / EVENT / PURPOSE OF TRAVEL: Participation in a music festival.

DESTINATION OF TRAVEL: Anaheim CA

DATES OF TRAVEL: Thursday, March 29 to Sunday, April 1, 2012

ACADEMIC BENEFITS TO STUDENTS: Students will perform in a National festival and receive
constructive comments, along with a rating.

PROPOSED METHOD OF TRANSPORTATION:

☐ District-owned vehicles

Transportation approval: _____

☒ Other Project Exploration

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

EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

	APPROX. COST	BUDGET CODE
Registration	<u>\$19,500.00</u>	<u>525/526 00 100 1001 168 6892</u>
Transportation	_____	_____
Meals	_____	_____
Lodging	_____	_____
Substitutes	<u>\$150.00</u>	<u>530 00 100 1001 168 6113</u>

TOTAL

\$19,650

WILL THE DISTRICT RECEIVE REIMBURSEMENT? _____

IF SO, SOURCE & AMOUNTS: _____

HOW ARE CHAPERONE EXPENSES PAID? **Chaperones are paying for their own expenses.**

COST TO EACH STUDENT \$ **360**

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? **Tax credit monies**

FUNDING SOURCE(S): **Parents**

FUNDRAISING ACTIVITIES PLANNED (If applicable):

Coffee Fundraiser, Car Wash

SUBMITTED BY: _____

Signature

9/10/11

Date

APPROVED BY: _____

Principal/Supervisor

9/12/11

Date

Associate Superintendent/Superintendent

9-12-11

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: **IRHS**

ESTIMATED NUMBER OF STUDENTS: 10

NAME OF SCHOOL GROUP/CLUB/ENTITY: **IRHS/DECA**

STAFF ADVISOR(S)/CHAPERONES: **Jim Norby**

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

ACTIVITY / EVENT / PURPOSE OF TRAVEL: **ICDC DECA Competition**

DESTINATION OF TRAVEL: **Salt Lake, UT**

DATES OF TRAVEL: **April 28 thru May 1, 2012**

ACADEMIC BENEFITS TO STUDENTS: **a. Leadership development**

b. DECA organization and management on the local, state, and/or national level

c. DECA activities and competitive events on the local, state, and national level

d. Career exploration and/or career development activities

e. Communications skill development and/or improvement

PROPOSED METHOD OF TRANSPORTATION:

☐ District-owned vehicles

Transportation approval: _____

☒ Other **Air**

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

EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

	APPROX. COST	BUDGET CODE
	<u>135.00</u>	<u>400-12-270-2190-280-6360</u>
Registration	<u>1350.00</u>	<u>526/850-00-100-3400-280-6892</u>
	<u>245.39</u>	<u>400-12-270-2190-280-6582</u>
Transportation	<u>2,453.90</u>	<u>526/850-00-100-3400-280-6519</u>
	<u>200.00</u>	<u>400-12-270-2190-280-6582</u>
Meals	<u>N/A Students Pay</u>	_____
	<u>500.00</u>	<u>400-12-270-2190-280-6582</u>
Lodging	<u>500.00</u>	<u>526/850-00-100-3400-280-6892</u>
	<u>200.00</u>	<u>400-12-270-1001-280-6113</u>
Substitutes		
TOTAL	<u>\$5,584.29</u>	

WILL THE DISTRICT RECEIVE REIMBURSEMENT? N/A
IF SO, SOURCE & AMOUNTS: _____

HOW ARE CHAPERONE EXPENSES PAID? CTE

COST TO EACH STUDENT \$ 500

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? club funds, tax credits, and fund raising

FUNDING SOURCE(S): Hawk House (SBE), fund raising, CTE, & JTED

FUNDRAISING ACTIVITIES PLANNED (If applicable):
car washes, TBD

SUBMITTED BY: _____
Signature

9/13/11
Date

APPROVED BY: _____
Principal/Supervisor

9/13/11
Date

Associate Superintendent/Superintendent

9-19-11
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: 10

NAME OF SCHOOL GROUP/CLUB/ENTITY: CDO/DECA

STAFF ADVISOR(S)/CHAPERONES: Terri Bible

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

ACTIVITY / EVENT / PURPOSE OF TRAVEL: International Career Development Conference--National DECA Competition

DESTINATION OF TRAVEL: Salt Lake, UT

DATES OF TRAVEL: April 28 thru May 1, 2012

ACADEMIC BENEFITS TO STUDENTS: a. Leadership development

b. DECA organization and management on the local, state, and/or national level

c. DECA activities and competitive events on the local, state, and national level

d. Career exploration and/or career development activities

e. Communications skill development and/or improvement

PROPOSED METHOD OF TRANSPORTATION:

☐ District-owned vehicles

Transportation approval: _____

☒ Other Air

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

EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

	APPROX. COST	BUDGET CODE
Registration	<u>\$135.00/Advisor</u> <u>\$1350.00/Students</u>	<u>400-12-270-2190-282-6360</u> <u>850/526-00-100-3400-282-6360</u>
Transportation	<u>\$245.39/Advisor</u> <u>\$2,453.90/Students</u>	<u>400-12-270-2190-282-6582</u> <u>850/526-00-100-3400-282-6582</u>
Meals	<u>200.00/Advisor</u> <u>NA Students Pay</u>	<u>400-12-270-2190-282-6582</u> _____
Lodging	<u>500.00 Advisor</u> <u>500.00 Students</u>	<u>400-12-270-2190-282-6582</u> <u>850/526-00-100-3400-282-6582</u>
Substitutes	<u>200.00</u>	<u>400-12-270-1001-282-6113</u>

TOTAL

\$5,584.29

WILL THE DISTRICT RECEIVE REIMBURSEMENT? N/A
IF SO, SOURCE & AMOUNTS: _____


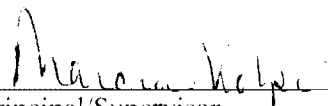
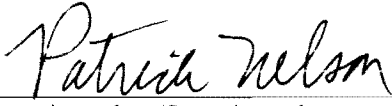
HOW ARE CHAPERONE EXPENSES PAID? CTE

COST TO EACH STUDENT \$ 500

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? club funds, tax credits, and fund raising

FUNDING SOURCE(S): Dorado Den (SBE), fund raising, CTE & JTED

FUNDRAISING ACTIVITIES PLANNED (If applicable):
car washes, TBD

SUBMITTED BY:	<u></u>	<u>9/12/11</u>
	Signature	Date
APPROVED BY:	<u></u>	<u>9/15/11</u>
	Principal/Supervisor	Date
	<u></u>	<u>9-19-11</u>
	Associate Superintendent/Superintendent	Date