Attach supporting documentation as needed

ORIGINAL SUBMISSION

SCHO	OL: Coronado K-	8			
	ESTIMATED NUMBER OF STUDENTS: 7				
		- DUP/CLUB/ENTITY: Odyssey of the Mi	nd		
		IAPERONES: Jennifer Pike, Marina			
	os and Aaron Sta		moretti, Medic Bianchara, Nowona		
ABSEI	NCE: # Days <u>7</u> Su	ub Required: Yes No # of S	chool Days Missed <u>0</u>		
	YITY / EVENT / P <u>etition.</u>	URPOSE OF TRAVEL: <u>Attend the 2016</u>	Odyssey of the Mind World Finals		
DESTI	NATION OF TRA	VEL: lowa State University, Ames, low	<u>a</u>		
DATES OF TRAVEL: May 24, 2016 - May 30, 2016 ACADEMIC BENEFITS TO STUDENTS: Students will participate in the 2016 World Finals Odyssey of the Mind Competition with teams from around the world. Students will gain experience in public speaking, creative writing, dance, singing, artistic creation and display, as					
well as	s opportunity for	cultural exchange.			
Dis Transpo	strict-owned vehicle ortation approval: _				
	oenses paid from an Organization	y of the following accounts? Auxiliary	_ Tax Credits <u>X</u> Club Funds <u>X</u>		
EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)					
		APPROX. COST	BUDGET CODE		
	Registration	<u>\$4,600.00</u>	526/850 001001001115 6892		
	Transportation	<u>\$7,151.25</u>	<u>526/850 001001001115 6519</u>		
	Meals	Included			
	Lodging	<u>Included</u>			

Su	1	4:4	4 .	
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<u>N/A</u>

TOTAL

\$11,751.25

WILL THE DISTRICT RECEIVE REIMBURSEMENT? No IF SO, SOURCE & AMOUNTS:	
HOW ARE CHAPERONE EXPENSES PAID? Parent chaperones separately.	are paying their own costs
COST TO EACH STUDENT \$ 0.00	
HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUIP PROVISIONS)? Travel is provided at no cost to students.	DENTS (LOW FAMILY INCOME
FUNDING SOURCE(S):	
FUNDRAISING ACTIVITIES PLANNED (If applicable):	
Silip	
SUBMITTED BY: Signature	<u>4/27/16</u> Date
APPROVED BY: Principal/Supervisor	<u>4/27/16</u> Date
i imelpan supervisor	Dail

Associate Superintendent/Superintendent

Attach supporting documentation as needed

ORIGINAL SUBMISSION

SCHOOL: Prince			
ESTIMATED NUMB	ER OF STUDENTS: 7		
NAME OF SCHOOL	GROUP/CLUB/ENTITY:	Prince Odyssey of	f the Mind
STAFF ADVISOR(S)	/CHAPERONES: <u>Jennif</u>	er Campbell, Sabin	a Prijic, Kristin Prinz
ABSENCE: # Days 6	Sub Required: Yes	⊠ No # of S	chool Days Missed <u>0</u>
ACTIVITY / EVENT	/ PURPOSE OF TRAVEL	: World Finals Odys	ssey Tournament
DESTINATION OF T	RAVEL: <u>Iowa State Un</u> i	iversity-Ames, lowa	!
DATES OF TRAVEL: ACADEMIC BENEFI problem solving co		Students will partions AZ 21 st Century a	cipate on a global level in creative nd NAGC standards
PROPOSED METHOI District-owned veh Transportation approva Other Airline and S	1:	N:	
Are expenses paid from Parent Organization X	any of the following acco	ounts? Auxiliary <u>X</u> Ta	x Credits <u>X</u> Club Funds <u>X</u>
EXPENSES	REQUESTED: (OBTAI	N RECEIPTS FOR A	ALL INCURRED EXPENSES)
	APPROX. COST		BUDGET CODE
Registration	<u>\$5,55</u>	<u>0</u> —	<u>526-00-100-1001-111-6892</u>
Transportation	\$6,50 	<u>0</u> –	<u>526-00-100-1001-111-6519</u>
Meals	\$30 (for travel days-9 people		<u>850-00-100-1001-111-6892</u> ———
Lodging		_ _	
Substitutes			

WILL THE DISTRICT RECEIVE REIMBURSEMENT? No IF SO, SOURCE & AMOUNTS:	
HOW ARE CHAPERONE EXPENSES PAID? club funds	
COST TO EACH STUDENT \$ \$0	
HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUD PROVISIONS)? parent organization, community donations, fund rais	
FUNDING SOURCE(S): district, tax credits, fund raising	
FUNDRAISING ACTIVITIES PLANNED (If applicable): <u>bake sales, sno cone sales, food/craft booth at school carnival, ta</u> <u>letters to businesses.</u>	x credit drive, writing request
The travel is necessary for the implementation of the project funding the travel.	
SUBMITTED BY: Signature	Date
APPROVED BY: Principal/Supervisor	4/29/16 Date 116
Associate Superintendent/Superintendent	Date Date

AMPHITHEATER PUBLIC SCHOOLS STAFF/STUDENT TRAVEL REQUEST Attach supporting documentation as needed

ORIGINAL SUBMISSION

SCHOOL:	Painted SI	ZY.			
ESTIMATI	ED NUMBI	ER OF STUDENTS: 7			
NAME OF	SCHOOL (GROUP/CLUB/ENTITY:	<u>Odyssey</u>	of the Mind	
STAFF AD Sharon Co	VISOR(S) ollins, Dar	CHAPERONES: Brian	ne Ronnie , Colby Ko	e, Rebecca Ford, Toby Ford, Jeremy You rn, Penny Noble, Louisa Randall	ıng.
ABSENCE:	# Days <u>5</u>	Sub Required: Yes	⊠ No	# of School Days Missed 0	
ACTIVITY	/EVENT/	PURPOSE OF TRAVEL	: Odyssey	of the Mind World Finals 2016	
DESTINAT	ION OF T	RAVEL' <u>Iowa State Univ</u>	ersity, Ame	s, Iowa	
ACADEMIC creativity competed present th	C BENEFI skills. O at Region eir proble METHOD owned vehi	ur students have be nals and State. Work m and compete agains OF TRANSPORTATION cles	en prepari ds will be st teams fr	ther order of thinking, problem solving, a ing their problems for 8 months and ha the final competition where each team v om all over the world.	ave
Other <u>Ai</u>	rline-Unite	d and car rentals pendin	g with Avis	or Budget	
Are expense Parent Organ	s paid from ization <u>Ye</u>	any of the following acco	unts? Auxil	liary <u>Yes</u> Tax Credits <u>Yes</u> Club Funds <u>Yes</u>	
EX	Penses 1	REQUESTED: (OBTAI	N RECEIPT	IS FOR ALL INCURRED EXPENSES)	
		APPROX. COST	,	BUDGET CODE	
Regi	stration	<u>\$5,750</u>		525/526/850/00-100-1001-114-6892	
Tran	sportation	<u>\$6.200</u>		<u>530-00-100-3400-114-6519</u>	
Meal	İş	included		•	
oho.T	ที่กด	included			

Shi	1		4
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<u>\$0</u>

TOTAL

<u>\$11,950.00</u>

Attach supporting documentation as needed

ORIGINAL SUBMISSION

SCHOOL: CDO		
ESTIMATED NUMBER OF S	TUDENTS: <u>12</u>	
NAME OF SCHOOL GROUP/	'CLUB/ENTITY: Odys s	sey Club
STAFF ADVISOR(S)/CHAPE	RONES: <u>Coaches: Cym</u>	nry DeBoucher, Kitt Leonard, Amy Selegue, Joeli
ABSENCE: # Days 6 Sub Re	equired: Nes Xes Xequired	# of School Days Missed <u>0</u>
ACTIVITY / EVENT / PURPO	SE OF TRAVEL: Odys	sey of the Mind World Finals
DESTINATION OF TRAVEL:	Ames, Iowa	
DATES OF TRAVEL: May 24 ACADEMIC BENEFITS TO S of competition		solving and creative thinking at an international level
PROPOSED METHOD OF TR. District-owned vehicles Transportation approval: Other Air and ground trans		
Are expenses paid from any of t Parent Organization	he following accounts? A	Auxiliary <u>x</u> Tax Credits <u>x</u> Club Funds <u>x</u>
EXPENSES REQUE	STED: (OBTAIN REC	EIPTS FOR ALL INCURRED EXPENSES)
	APPROX. COST	BUDGET CODE
Registration	9800.00	<u>526/850-00-100-2190-282-6892</u>
Transportation	<u>10700.00</u>	<u>526/850-00-100-2190-282-6519</u>
Meals	2000.00	<u>526/850-00100-2190-282-6892</u>
Lodging	400.00	<u>526/850-00100-2190-282-6892</u>
Substitutes	0	

WILL THE DISTRICT RECEIVE REIMBURSEMENT? No IF SO, SOURCE & AMOUNTS:
HOW ARE CHAPERONE EXPENSES PAID? Through donations and tax credits
COST TO EACH STUDENT \$ 400.00 tax credit
HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? <u>NA</u>
FUNDING SOURCE(S): Amphi District, Amphi Foundation, Tax Credit donations from the community and students, Club and Auxiliary Accounts, CDO Site Council Tax Credit Fund
FUNDRAISING ACTIVITIES PLANNED (If applicable): <u>Tax Credit Fund Drive</u> , Spontaneous workshop
The travel is necessary for the implementation of the project funding the travel.
SUBMITTED BY: 427/16 Signature Date
APPROVED BY: Principal/Supervisor Date

Associate Superintendent/Superintendent

Attach supporting documentation as needed

ORIGINAL SUBMISSION

SCHC	OOL: <u>IRHS</u>				
ESTIN	MATED NUMBE	ER OF STUDENTS: 7			
NAMI	E OF SCHOOL O	GROUP/CLUB/ENTITY:	Odyssey of	the Mind	
STAF	F ADVISOR(S)/0	CHAPERONES: Jennif	er Pike (Corc	nado), Donna & Jer	rell Campbell
ABSE	NCE: # Days <u>7</u>	Sub Required: Yes	⊠ No	# of School Days Miss	sed <u>0</u>
ACTIV	VITY / EVENT /	PURPOSE OF TRAVEL	։ <u>World Final</u>	<u>s</u>	
DEST	INATION OF TR	RAVEL: <u>Ames, Iowa</u>			
		<u>5/24/16 - 5/30/16</u> TS TO STUDENTS:	_		
Di Γransp	OSED METHOD strict-owned vehi ortation approval er Charter Bus	l :	N:		
Are expanded	penses paid from Organization	any of the following acco	ounts? Auxilia	ry <u>X</u> Tax Credits	Club Funds <u>X</u>
,	EXPENSES I	REQUESTED: (OBTAI	N RECEIPTS	FOR ALL INCURRE	ED EXPENSES)
ı		APPROX. COST		BUDGET CO	DE
	Registration	<u>\$135.00</u>		<u>525/850-00-1</u>	00-1001-280-6892
	Transportation	<u>\$6,751.25</u>		<u>525/850-00-1</u>	00-1001-280-6519
	Meals				
	Lodging	<u>\$5,750.00</u>		<u>525/850-00-1</u>	00-1001-280-6892
	Substitutes				
	TOTAL	\$12,636,25			

WILL THE DISTRICT RECEIVE REIMBURSEMENT? N/A IF SO, SOURCE & AMOUNTS:
HOW ARE CHAPERONE EXPENSES PAID?
COST TO EACH STUDENT \$ 1,539.46
HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)?
FUNDING SOURCE(S): Amphi District contributed \$750/student
FUNDRAISING ACTIVITIES PLANNED (If applicable): go-fund-me, yard sales, super hero cape sale, car wash
SUBMITTED BY: Signature 5/3/16 Date
APPROVED BY: Malale a Sund # 5/3/1/ Principal/Supervisor Date
Associate Superintendent Date

Attach supporting documentation as needed

ORIGINAL SUBMISSION

SCHOOL: CDO							
ESTIMATED NUMBER OF STUDENTS: 11							
NAMI	NAME OF SCHOOL GROUP/CLUB/ENTITY: Canyon Cagers (Girls Basketball)						
STAF	F ADVISOR(S)/CH	APERONES: Coach	es Kent Senze	e & Darrin Pierce & Devina Montierth			
ABSE	NCE: # Days <u>6</u> Su	ıb Required: 🗌 Yes	⊠ No	# of School Days Missed 0			
ACTIV	/ITY / EVENT / PU	RPOSE OF TRAVEL	: <u>Summer Bas</u>	ketball Tournament			
DEST)	INATION OF TRAV	VEL: <mark>San Diego, Ca</mark>	<u>lifornia</u>				
ACAD with o	DATES OF TRAVEL: July 12 - 17, 2016 ACADEMIC BENEFITS TO STUDENTS: Student athletes will bond as a team and learn how to get along with others. They will learn leadership and sportsmanship qualities during their competition with other teams. They should learn how to budget their own money as well.						
☐ Dia Transp	strict-owned vehicle. ortation approval:			nicles			
	penses paid from any Organization <u>no</u>	y of the following acco	ounts? Auxilia	y <u>yes</u> Tax Credits <u>yes</u> Club Funds <u>yes</u>			
EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)							
	APPROX. COST BUDGET CODE						
	Registration	<u>\$550.00</u>		526/850-00-100-1001-282-6892			
	Transportation	self pay					
	Meals	self pay					
	Lodging	<u>\$2470.00</u>		526/850-00-100-1001-282-6892			
	Substitutes						

IF SO, SOURCE & AMOUNTS:

WILL THE DISTRICT RECEIVE REIMBURSEMENT? **no**

HOW ARE CHAPE	RONE EXPENSES PAID? <u>no chaperone costs</u>	
COST TO EACH ST	TUDENT \$ 120 for food and pocket money	•
PROVISIONS)? Th	AVEL MADE AVAILABLE TO ALL ELIGIBLE nis travel is available to all whether they cars such as car washes.	STUDENTS (LOW FAMILY INCOME afford it or not. If they can't, there
FUNDING SOURCE	E(S): <u>Canyon Cagers</u>	
FUNDRAISING AC none	CTIVITIES PLANNED (If applicable):	
	<i>'</i>	
	VX	
SUBMITTED BY: _	Signature Signature	4-27-16 Date
APPROVED BY: _	Principal/Supervisor	
-	Associate Superintendent/Superintendent	Date Date

Attach supporting documentation as needed ORIGINAL SUBMISSION

SCHOOL; <u>CDO</u>							
ESTIMATED NUMBER OF STUDENTS: 18							
NAME OF SCHOOL GROUP/CL	NAME OF SCHOOL GROUP/CLUB/ENTITY: CDO Volleyball						
STAFF ADVISOR(S)/CHAPERO <u>Donaghay</u>	DNES: <u>David Garwac</u>	ki, Michelle Gerard, Tim McGann, Ross					
ABSENCE: # Days 3 Sub Required: Yes No # of School Days Missed 0 - Fall Break							
ACTIVITY / EVENT / PURPOSE	OF TRAVEL: <u>NFINITY 1</u>	4 th Annual Southern California Invitational					
DESTINATION OF TRAVEL: Sa	n Diego, CA						
DATES OF TRAVEL: October 13 ACADEMIC BENEFITS TO STU states	-15, 2016 JDENTS: Competition	with 32 elite teams from several western					
PROPOSED METHOD OF TRAN District-owned vehicles Transportation approval: Other Enterprise rental cars	SPORTATION:						
Are expenses paid from any of the f Parent Organization	following accounts? Auxilia	ry Tax Credits <u>Yes</u> Club Funds <u>Yes</u>					
EXPENSES REQUESTI	ED: (OBTAIN RECEIPT)	S FOR ALL INCURRED EXPENSES)					
AP	PROX. COST	BUDGET CODE					
Registration	<u>\$550</u> ———	<u>525-00-620-1001-282-6892</u>					
Transportation	<u>\$750</u>	<u>526/850-00-100-1001-282-6519</u>					
Meals	<u>\$2000</u>	<u>526/850-00-100-1001-282-6892</u>					
Lodging	<u>\$2000</u>	<u>526/850-00-100-1001-282-6892</u>					
Substitutes	\$0						

\$5300

WILL THE DISTRICT RECEIVE REIMBURSEMENT? N/A IF SO, SOURCE & AMOUNTS:
HOW ARE CHAPERONE EXPENSES PAID? Club Fund
COST TO EACH STUDENT \$ 0
HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? <u>N/A</u>
FUNDING SOURCE(S): Club Funds, Tax Credit
FUNDRAISING ACTIVITIES PLANNED (If applicable):
The travel is necessary for the implementation of the project funding the travel.
SUBMITTED BY: Signature 4/20/16 Date
APPROVED BY: Principal/Supervisor 4/35/16 Date
Associate Superintendent Date

EMPLOYEE(S): <u>Jose</u>	<u>Salcido</u>	SCHO	OOL: <u>AHS</u>		
			Department (opt.): Math		
			DATE(S): <u>6/13-18/16</u>		
ACTIVITY/EVENT:AP	(Advanced Placement)	Physics 1: Algebra B	· , · — · · · · · · · · · · · · · · · ·		
LOCATION: Santa Fe, N	New Mexico				
ABSENCE: # Days	6 Sub Required: ☐	Yes ⊠No	# of School Days Missed 0		
EXPENSES REQUESTE	D: (OBTAIN RECEIP	ΓS FOR ALL INCURI	RED EXPENSES)		
APPROXIMATE COST			BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)		
Registration	<u>\$400.00</u>		<u>103.16.100.2210.281.6360</u>		
Transportation Rental Car	\$400.00 M \$333.13	ode <u>air</u>	103.16.100.2210.281.6582 103.16.100.2210.281.6582		
Meals	<u>\$324.00</u>		<u>103.16.100.2210.281.6582</u>		
Lodging	<u>\$200 .00</u>		103.16.100.2210.281.6582		
Substitutes					
TOTAL	<u>\$1,657.13</u>				
The District will [(or)	will not 🛛 receive rei	mbursement from outs	side sources.		
Purpose of travel: To atte	nd the Advanced Place	ement course.			
Outcomes and academic b		· · · · · · · · · · · · · · · · · · ·	g, I expect to learn better tools and techniques P Classroom.		
Submitted by:					
Signature	.0	111	Date 4/28/16		
	N,	Mansour	4/22/16		
Principal/S	Supervisor		Date		
Inc	mi hels		SIMIC		
Associate	Superintendent/Superin	tendent	Date rev. 9/21/05		

EMPLOYEE(S): Sonya	a Yount		SCHOOL: AHS	
			Departme	ent (opt.): <u>Music</u>
			DATE(S	S): <u>6/20-24/16</u>
ACTIVITY/EVENT: <u>AP (</u>	Advanced Placem	ent) Music Theo	ry	
LOCATION: <u>Seaside, CA</u>	<u> </u>			
ABSENCE: # Days 5	Sub Required	: □Yes ⊠No	# of School	ol Days Missed 0
EXPENSES REQUESTEI	D: (OBTAIN REC	EIPTS FOR ALL	INCURRED EXPE	NSES)
	<u>APPROXIM</u>	IATE COST	(Note: Tax	UDGET CODE/DESCRIPTION c credit contributions are District funds an udget code.)
Registration	<u>\$800.00</u>		103.16.10	0.2210.281.6360
Transportation Rental Car	\$450.00 \$350.00	Mode <u>air</u>		0.2210.281.6582 0.2210.281.6582
Lodging/Meals	\$450.00		103.16.10	<u>0.2210.281.6582</u>
Substitutes				
TOTAL	\$ 2,050.00			
The District will [(or) v	will not 🛛 receiv	e reimbursement	from outside sources.	
Purpose of travel <u>: To atter</u>	nd the Advanced I	Placement course	<u>.</u>	
Outcomes and academic be for helping students acqu				o learn better tools and techniques
Submitted by: Signature Principal/S	La Chart	Monseen	Haolia Date	4/28/14
Associate	Superintendent/Superi	perintendent	<u>\lambda / \lambda </u>	rev. 9/21/05
1122311444	1			

EMPLOYEE(S): <u>Pus</u>	<u>pa Rizal</u>	_ SC	HOOL: <u>District Offices</u>
]	Department (opt.): State and Federal Programs
Print Scharmen	,,,,	DA	TE(S): <u>June 26-28, 2016</u>
ACTIVITY/EVENT: Pa	rents as Teacher	s Foundational 2 Training	:Three Years Through Kindergarten
LOCATION: Parent	s as Teachers Na	tional Center 2228 Ball D	r., St. Louis, MO 63146
ABSENCE: # Days	s <u>3</u> Sub Requi	ed: Yes No	# of School Days Missed 0
EXPENSES REQUEST	ED: (OBTAIN R	ECEIPTS FOR ALL INCU	RRED EXPENSES)
	<u>APPROX</u>	IMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>525.00</u>		<u>474-00-100-2579-510-6360</u>
Transportation	<u>900.00</u>	Mode <u>airplane</u>	474-00-100-2190-510-6582
Rental Car			
Meals	<u>115.00</u>		474-00-100-2190-510-6582
Lodging	<u>205.00</u>		474-00-100-2190-510-6582
Substitutes			
TOTAL	<u>1,745.00</u>		
The District will [(or)	will not rece	ive reimbursement from ou	tside sources.
			hree Years Through Kindergarten to complete riculum within the district.
Outcomes and academic kinder-readiness and fa		ts and staff: Increase pare	ent involvement in schools, early intervention,
The travel is necessary fo	or the implementat	ion of the project funding th	ne travel.
Submitted by:	- Onto	me	4/29/16
Signature		A M 4 6 2 5	9/24/16 Date 4/29/14
XXY Principal	//////////////////////////////////////	veleu	$\frac{1/691/7}{\text{Date}}$
Man	in helan		5/18/16
Associate	e Superintendent/S	Superintendent	Date

EMPLOYEE(S): M	<u> Iary Beth Santillan</u>	OOL: District Offices			
			Department (opt.): State and Federal Programs		
		DA	ATE(S): <u>10-28-16 to 11-1-16</u>		
		ference for the Nation	nal Association for the Education of Homeless		
Children and Youth					
LOCATION: <u>Hyan</u>	tt Regency 9801 Inter	<u>national Drive, Orlan</u>	do, F.L.		
ABSENCE: # Da	nys <u>5</u> Sub Required:	□Yes ⊠No	# of School Days Missed 3		
EXPENSES REQUES	TED: (OBTAIN RECE	EIPTS FOR ALL INCU	RRED EXPENSES)		
	<u>APPROXIM</u>	ATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)		
Registration	<u>\$650.00</u>		<u>270-16-102-2579-510-6360</u>		
Transportatio	on <u>\$450.00</u>	Mode <u>Flight</u>	<u>270-17-102-2579-510-6582</u>		
Rental Car	<u>\$42.00</u>		<u>270-17-102-2579-510-6582</u>		
Meals	<u>\$130.00</u>		<u>270-17-102-2579-510-6582</u>		
Lodging	<u>\$476.72</u>		<u>270-17-102-2579-510-6582</u>		
Substitutes					
TOTAL	\$1,748.72				
The District will (or) will not receive reimbursement from outside sources.					
Purpose of travel: Na	tional Conference atter	ndance.			
Outcomes and academic benefits to students and staff: McKinney-Vento Liaison will receive specialized training, gain knowledge and obtain insights from federal officials and nationally recognized authorities related to McKinney-Vento law, best practices and available resources regarding the issue of homeless education.					
Submitted by: (M Signar Princi	BSULTIMAL Ture Man pal/Supervisor	vouri	$-\frac{4-29-16}{Date}$ $-\frac{4-29-16}{Date}$		
2	Town July	erintendent	_ <u>\frac{18}{18}</u> /\$		

EMPLOYEE(S):	Natalie Burnett, Mik	e Oreiup, Christy Suin e Beiarano. — Monic		epartment (opt.):
	Michael McConnell,		Patrick Nelson	DATE(S): <u>July 27-29, 2016</u>
	Γ: 5 th Annual STEM I	Forum & Expo		
ABSENCE: #	Days <u>3</u> Sub Requi	red: Yes No	# of School Da	ays Missed <u>0</u>
EXPENSES REQUI	ESTED: (OBTAIN RI	ECEIPTS FOR ALL IN	CURRED EXPENSE	S)
	<u>APPROX</u>	IMATE COST		GET CODE/DESCRIPTION lit contributions are District funds are code.)
Registration	\$2,470		140-16-100-22	210-510-6360
Transportat	tion <u>\$3,140</u>	Mode	140-16-100-22	210-510-6582
Rental Car				
Meals	<u>\$1,485</u>		140-16-100-22	210-510-6582
Lodging	<u>\$2,500</u>		140-16-100-22	10-510-6582
Substitutes				
TOTAL	<u>\$9,595</u>			
The District will 🗌	(or) will not ⊠ rece	eive reimbursement fron	1 outside sources.	
Purpose of travel: <u>T</u>	o attend the 5 th Annu	al STEM Forum & Ex	po.	
	emic benefits to student for educational chang		on gained will assist	in providing a wider knowledge
Submitted by: Sign	Hamin helson		<u>5/1</u> /5 Date	
0/1	cipal/Supervisor	Superintendent	Date 5/12/14 Date	