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: <u>IRHS</u>			
ESTIMATED NUMBEI	R OF STUDENTS: 18		
NAME OF SCHOOL G	ROUP/CLUB/ENTITY:	Women's Vo	olleyball Team
		ang (Head C	oach); Kathy Franklin; Ashleigh Houlton;
Chelsea Crane; Cher	<u>yi Wojdyla</u>		
ABSENCE: # Days 4	Sub Required: X Yes	☐ No	# of School Days Missed 1.5
ACTIVITY / EVENT / I	PURPOSE OF TRAVEL	.: <u>2018 NIKE I</u>	<u> Durango Fall Classic</u>
DESTINATION OF TR	AVEL: <u>Las Vegas, NV</u>	<u>′</u>	
DATES OF TRAVEL: 9	0/13/2018 - 9/16/2018	(Competition	n is on 9/14 & 9/15)
team's athletic and a	cademic performanc	e. Players w	nal and related travel is a reward for the ith low grades are not allowed to attend. mission of the school, where studies show
that student-athletes dropout rate, and few	involved in such ev ver discipline probler	ents tend to ns than tradi	have a higher grade-point average, lower tional students.
			ation and invitation only. Being invited to ss of the program on and off the court.
	OF TRANSPORTATIO	N:	
☐ District-owned vehice Transportation approval:			
	r Rental (District Inter-	scholastics Co	ntract/Vendor)
Are expenses paid from a Parent Organization		ounts? Auxilian	y Tax Credits <u>X</u> Club Funds <u>X</u>
EXPENSES R	EQUESTED: (OBTAI	N RECEIPTS	FOR ALL INCURRED EXPENSES)
	APPROX, COST	[	BUDGET CODE
Registration	<u>\$ 700.00</u>		<u>526/850-00-100-1001-280-6892</u>
Transportation	<u>\$1,755.00</u>		<u>526/850-00-100-1001-280-6519</u>

Meals	<u>\$1,250.00</u>	<u>526/850-00-100-1001-280-6892</u>
Lodging	<u>\$2,450.00</u>	526/850-00-100-1001-280-6892
Substitutes	<u>\$600.00</u>	530-00-100-3400-280-6113
TOTAL.	\$6.755.00	

WILL THE DISTRICT RECEIVE REIMBURSEMENT? <u>N/A</u>
IF SO, SOURCE & AMOUNTS: \_\_\_\_

HOW ARE CHAPERONE EXPENSES PAID? In budget, using club funds from fundrasing

COST TO EACH STUDENT \$ 0.00 (expection would be personal expenses; tournament shirt, etc)

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? All team members share the fundraising responsibilities. The Coaching Staff assists with Tax Credit Donations for all families that need assistance.

FUNDING SOURCE(S): Volleyball Tax Credit Monies and Club Funds

FUNDRAISING ACTIVITIES PLANNED (If applicable): 2018 Volleyball Camps, Varsity Team Sponsorships, Tax-Credit Campaign, Cookie-Dough Fundrasier.

SUBMITTED BY:

Signature

Date

APPROVED BY:

Principal Supervisor

Date

Multasl Byas

Associate Superintendent/Superintendent

Date

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

Transportation

\$1,755.00

<u>526/850-00-100-1001-280-6519</u>

Meals	<u>\$1,500.00</u>	<u>526/850-00-100-1001-280-6892</u>
Lodging	<u>\$3,675.00</u>	526/850-00-100-1001-280-6892
Substitutes	<u>\$600.00</u>	530-00-100-3400-280-6113
TOTAL	<u>\$8,130.00</u>	

WILL THE DISTRICT RECEIVE REIMBURSEMENT	?
IF SO, SOURCE & AMOUNTS:	

HOW ARE CHAPERONE EXPENSES PAID? In budget, using club funds from fundraising

COST TO EACH STUDENT \$ 0.00 (expection would be personal expenses: snacks, etc).

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? All team members share the fundraising responsibilities. The Coaching Staff assists with Tax Credit Donations for all families that need assistance.

FUNDING SOURCE(S): Volleyball Tax Credit Monies and Club Funds

FUNDRAISING ACTIVITIES PLANNED (If applicable):

2018 Volleyball Camps, Varsity Team Sponsorships, Tax-Credit Campaign, Cookie-Dough Fundraiser.

SUBMITTED BY:

Signature

Signature

APPROVED BY:

Principal/Supervisor

Date

Mulusl Byan

Associate Superintendent/Superintendent

Date

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 NUMBE	R OF STUDENTS: 20		
NAME OF SCHOOL O	ROUP/CLUB/ENTITY: Ac	ademic Decathloı	1
STAFF ADVISOR(S)/0	CHAPERONES: Chris and	Elethia Yetman	
ABSENCE: # Days 4	Sub Required: ⊠ Yes □	] No # of Sch	ool Days Missed 2
ACTIVITY / EVENT /	PURPOSE OF TRAVEL: <b>Rc</b>	ockwall (Texas) Ad	cademic Decathlon Scrimmage
DESTINATION OF TR	AVEL: Rockwall, Texas		
	October 25 - 28, 2018 S TO STUDENTS: Acade	mic Competitions	
PROPOSED METHOD ☐ District-owned vehi Transportation approval ☑ Other <u>Airlines, host</u>	:		
Are expenses paid from Parent Organization <u>xx</u>	any of the following accounts	s? Auxiliary	Гах Credits <u>xx</u> Club Funds <u>xx</u>
EXPENSES I	REQUESTED: (OBTAIN R	ECEIPTS FOR AI	LL INCURRED EXPENSES)
	APPROX. COST	Į	BUDGET CODE
Registration			
Transportation	<u>\$4000</u> \$4000	-	850-00-100-1001-282-6519 526-00-100-1001-282-6519

\$250

\$250

<u>\$400</u>

<u>\$440</u>

\$9,340

Meals

Lodging

Substitutes

**TOTAL** 

rev. 8/25/17

850-00-100-1001-282-6892 526-00-100-1001-282-6892

850-00-100-1001-282-6892

850-00-100-1001-282-6113

	CT RECEIVE REIMBURSEMENT? <u>No</u> AMOUNTS:	
HOW ARE CHAPE	RONE EXPENSES PAID? Club Funds	
COST TO EACH ST	TUDENT \$ <b>\$500</b>	
	AVEL MADE AVAILABLE TO ALL ELIGIBLE C Credit Donations, Club Funds, PTO Dona	
FUNDING SOURCE	E(S): Tax Credit Donations, Fundraising, De	<u>onations</u>
FUNDRAISING AC	TIVITIES PLANNED (If applicable):	
P. COTT CONTROL OF THE PROPERTY OF THE PROPERT		
The travel is necessa	ry for the implementation of the project funding th	e travel.
SUBMITTED BY: _	Signature	<u>경/14</u> /14 Date
APPROVED BY: _	Principal/Supervisor  Muhas Byan	<u>8/00/18</u> Date
_		831/18
	Associate Superintendent/Superintendent	Date

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 NUMB	ER OF STUDENTS: 46				
NAME OF SCHOOL	GROUP/CLUB/ENTITY:	Ironwood R	idge Show Choir		
STAFF ADVISOR(S)/Potter	/CHAPERONES: AJ Le	pore, Mary D	ickson, Lori Lepore, Kayte Crowther, Tamera		
ABSENCE: # Days 4	Sub Required: X Yes	□No	# of School Days Missed 3		
ACTIVITY / EVENT /	PURPOSE OF TRAVEL	: <u>Los Alamito</u>	os Show Choir Competition		
DESTINATION OF TR	RAVEL: <u>Los Alamitos I</u>	<del>ligh School,</del>	Los Alamitos, CA		
around the country aspects of the show	DATES OF TRAVEL: March 13-16, 2019 ACADEMIC BENEFITS TO STUDENTS: Students will compete against other show choirs from around the country and be adjudicated by a panel of judges to assess the musical and visual aspects of the show choir. The director and students will be able to use the comments to improve their future performances.				
PROPOSED METHOD  District-owned vehi Transportation approval Other Charter Bus (		<b>1</b> :			
Are expenses paid from Parent Organization $\underline{X}$	any of the following accor	unts? Auxiliar	y Tax Credits X Club Funds X		
EXPENSES R	REQUESTED: (OBTAIN	N RECEIPTS	FOR ALL INCURRED EXPENSES)		
	APPROX. COST		BUDGET CODE		
Registration	<u>\$1,600.00</u>		Parent organization to pay		
Transportation	<u>\$5,048.00</u>		<u>526/850-00-100-1001-280-6519</u>		
Meals			Self-paid		
Lodging	<u>\$10,400.00</u>		526/850-00-100-1001-280-6892		

Substitutes

\$660.00

530-00-100-3400-280-6113

**TOTAL** 

\$17,708.00

WILL THE DISTRICT RECEIVE REIMBURSEMENT? <u>N/A</u>
IF SO, SOURCE & AMOUNTS: \_\_\_\_

HOW ARE CHAPERONE EXPENSES PAID? Chaperones pay

COST TO EACH STUDENT \$ 550

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? <u>Fundraisers will be held to offset cost</u>. <u>Scholarships will be provided when necessary to ensure that no student is kept from the trip due to finances</u>.

FUNDING SOURCE(S): Choir Club Account, Choir Tax Credit Account, Choir Booster Club

FUNDRAISING ACTIVITIES PLANNED (If applicable):

UofA Football Concessions, Butter Braids sales, Pizza Kit sales, restaurant nights, car wash

APPROVED BY:

...

Principal/Supervisor

Associate Superintendent/Superintendent

8/27/18

8/27/18

ate

*\_\_\_\_\_\_.* Date

<u> 1211</u>

Date

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: Coronado K-8
ESTIMATED NUMBER OF STUDENTS: 115
NAME OF SCHOOL GROUP/CLUB/ENTITY: 8th grade
STAFF ADVISOR(S)/CHAPERONES: Shelley Quevedo (coordinator) Chaperones: Shelley Quevedo, Robert Retherford, Katie Bruce, Leigh Anne Wright, Jeremy Hayes, Rebecca Green, Mike Pastor, Gerad Ball, Erika Sparlin, Lauren Marlatt, Adam Upmann, and Susan Northam.
ABSENCE: # Days 3 Sub Required: Yes No # of School Days Missed 1
ACTIVITY / EVENT / PURPOSE OF TRAVEL: Field Trip to see physics in action.
DESTINATION OF TRAVEL: Knotts Berry Farm, 8039 Beach Blvd, Buena Park, CA 90620
DATES OF TRAVEL: May 9-11, 2019 ACADEMIC BENEFITS TO STUDENTS: The students will compete in the Knotts Berry Farm Physics Olympics. Prior to the trip, students will receive instruction in speed, g-forces and kinetic energy. A study guide will be developed as well. Five roller coasters on site will be used to compete. Students will calculate the kinetic energy from coasters at their highest point of fall. Students will calculate the g-forces exerted in the five roller coasters from the highest to lowest point. Students will calculate top speed. The students will work in groups of 3-4. The groups will compete for first through fourth place for a plaque. Each student will be provided a mini composition book to take data throughout the trip. Once back at school, the students will be given a class period to complete the competition. The winners will be announced on the announcements.
PROPOSED METHOD OF TRANSPORTATION: ☐ District-owned vehicles  □ Iransportation approval: ☐ Other Gray Line Tours
Are expenses paid from any of the following accounts? Auxiliary X Tax Credits X Club FundsParent Organization

#### EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

	APPROX	K, COST	BUDGET CODE
Registra	ation <u>\$9,384.00</u>		525/526.00.100.1001.115.6892
Transpo	ortation <u>\$13,500.00</u>		525/526.00.100.1001.115.6519
Meals	<u>Included</u>		againtee section of the section of t
Lodging	g <u>Included</u>		
Substitu	ates <u>\$1,320.00</u>		530.00.100.1001.115.6113
TOTAL	<b>\$24,204.00</b>		
IF SO, SOURCE HOW ARE CH	TRICT RECEIVE REIME E & AMOUNTS: HAPERONE EXPENSES		ree based on the enrollment of
<u>students.</u>			
COST TO EAC	H STUDENT \$ <b>210.00</b>		
PROVISIONS)? Also, we have the students tall eligible stu	We are working on for a present to tell us how much the dents have a means of	undraising in a variety of supplement needed fund ey can afford and have a f f attending.	TUDENTS (LOW FAMILY INCOME ways. The PTO is willing to help. s for scholarship. We have asked undraising goal to make sure that
funding will co	ome from tax credit, sc	cholarship, and fundraising	- tor a majority or the trip. Other
	ACTIVITIES PLANNED cessions at home games.	O (If applicable):	
SUBMITTED BY	Y: Shelly Signature	Quevedo	$\frac{8/24/18}{\text{Date}}$
APPROVED BY:	Principal/Superviso	Burano	8/27/18 Date
	- I was	/	831/8 rev. 10/1/07
	Associate Superinfe	endent/Superintendent	Date

## <u>THIS FORM SHOULD BE USED FOR ALL TRAVEL EXCEPT THAT TRAVEL WITHIN PIMA</u> <u>COUNTY OR A.I.A. SANCTIONED EVENT TRAVEL.</u>

EMPLOYEE(S): L	<u>ee Street</u>	D	COOL: <u>CDO</u> repartment (opt.): <u>IB</u> TE(S): <u>October 6-9, 2018</u>
	IB Visual Arts, Category ston, Texas	<u>y 2</u>	
ABSENCE: # Da	ays <u>4</u> Sub Required:	]Yes ⊠No	# of School Days Missed
EXPENSES REQUES	TED: (OBTAIN RECEI	PTS FOR ALL INCUR	RED EXPENSES)
	<u>APPROXIMAT</u>	<u>ΓΕ COST</u>	BUDGET CODE/DESCRIPTION  (Note: Tax credit contributions are District funds an require a budget code.)
Registration	<u>\$ 890.00</u>		<u>140-19-100-2210-510-6360</u>
Transportation	on <u>\$ 500.00</u>	Mode <u>airline</u>	<u>140-19-100-2210-510-6582</u>
Rental Car	\$ 100.00 (shuttle)		<u>140-19-100-2210-510-6582</u>
Meals	<u>\$ 115.50</u>		<u>140-19-100-2210-510-6582</u>
Lodging	<u>\$ 550.00</u>		<u>140-19-100-2210-510-6582</u>
Substitutes	<u>\$ 0.00</u>		
TOTAL	<u>\$2,155.50</u>		
Purpose of travel: <u>IB 1</u>	olace and maintained. Si	nd practice require IB	side sources.  Specific workshop training to ensure program re initial training but also updated training
to ensure teacher pre	paredness in maintaining	staff: IB Workshops g benchmarked rigor :	include specialized in depth academic training and reflective skills
Submitted by:  Signatu  Princip		7 8 D	$\frac{5/3}{3}$ 1/8  ate $\frac{2/3}{3}$

Associate Superintendent/Superintendent

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

DIVII DO	YEE(S): <u>Bo</u>	b Hehli		SCHOOL: <u>Nash</u>	
•	<u>Tay</u>	ylor Stender	Elizabeth Williams	Department (opt.):	<b>)</b>
اي				DATE(S): <u>10/17/18 to 10/20/18</u>	£
•	TV/EVENT: N	a Evanças Uni	versity National Conve	m4ion	•
LOCAT		egas, NV	versity National Conve	ation	
•	W 44				
ABSEN	CE: # Day:	s 4 Sub Red	quired: \( \sum Yes  \subseteq No	# of School Days Missed 3	
EXPENS	SES REQUEST	ED: (OBTAIN	RECEIPTS FOR ALL	INCURRED EXPENSES)	
		<u>APPR</u>	OXIMATE COST	<u>BUDGET CODE/DESCI</u> (Note: Tax credit contributions are I require a budget code.)	
F	Registration	<u>\$1,725.00</u>		100-18-100-2210-110-6360	
T	ransportation		Mode _	· ·	
F	Rental Car	<u>\$500.00</u>		100-19-100-2210-110-6582	
N	Meals	<u>\$471.75</u>		100-19-100-2210-110-6582	•
L	odging	<u>\$1,700.00</u>		100-19-100-2210-110-6582	
S	ubstitutes	<u>\$350.00</u>	•	100-19-100-2210-110-6113	
	TOTAL	<u>\$4,746.75</u>			
The Distr	ict will [ (or)	will not 🛛 1	receive reimbursement fi	rom outside sources.	
mission o Improve	f all students b	eing prepared e focus: Cultu	l for college and beyon re of Universal Achiev	ersity National Convention to support our d. The NEU Six Exceptional Systems of Sement, Collaboration, Standards Alignme	School ·
Outcomes	and academic	benefits to stud	lents and staff: Increas	e teacher knowledge. Increase student ac	hievement.
Submitted	l by: Signature	BAT	Hali-		
			Dajan-	Date SIN 18 Date	

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

	rie Sheber ary Kitay	Kelsey Glavin	SCHOOL: Prince Department (opt.):			
Gildali-(1)(me m	dockraze: \$2200kbannon-keptay_subag		DATE(S): October 17-20, 2018			
		iversity National Convent Blvd, Las Vegas, Nevada 8				
ABSENCE: # Days	4 Sub Re	equired: ⊠Yes □No	# of School Days Missed 3			
LACENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)						
	APPR	ROXIMATE COST	BUDGET CODE/DESCRIPTION  (Note: Tax credit contributions are District funds and require a budget code.)			
Registration	<u>\$1725.00</u>		100-19-100-2210-111-6360			
Transportation	<u>\$774.60</u>	Mode <u>Air</u>	100-19-100-2210-111-6582			
Rental Car	Alf-Statement and a second public					
Meals	<u>\$471.75</u>		100-19-100-2210-111-6582			
1.odging	\$1301.60		100-19-100-2210-111-6582			
Substitutes	\$600.00		100-19-100-2210-111-6113			
TOTAL	<u>\$4872.95</u>					
enstruct will [ (or) will not [ receive reimbursement from outside sources.						
Purpose of travel: To atte	end the Natio	onal Convention for No Ex	cuses University.			
Outcomes and academic benefits to students and staff: This convention concentrates on training administrators and teachers to lead high poverty schools and eliminate the achievement gap for all students. It focuses on leading a						
school towards the belief of universal achievement, that every student has the right to be educated in a way that prepares them for college and that it is the responsibility of the school to implement six exceptional systems that						
make college a reality.	professional and the second		ocasos to mapiement sta exceptional systems that			
The travel is necessary for	the impleme	ntation of the project fundir	g the travel.			
Submitted by: Signature		XD	8/30/18 Date			
Principal/	Supervisor	Buar	8/30/18 Date			
'	(wies		X131118			

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

EMPLOYEE(S): Jere	emy Tarbet		CHOOL: <u>CDO</u> Department (opt.):  DATE(S): <u>10/30-11/2, 2018</u>
ACTIVITY/EVENT: <u>SE</u> LOCATION: <u>Las Ve</u>	MA Car Show gas, Nevada		
ABSENCE: # Days	4 Sub Required: [2]	⊠Yes □No	# of School Days Missed 4
EXPENSES REQUESTE	ED: (OBTAIN RECEI	PTS FOR ALL INC	URRED EXPENSES)
	<u>APPROXIMA</u>	TE COST	BUDGET CODE/DESCRIPTION  (Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$100.00</u>		<u>260-19-311-2210-282-6360</u>
Transportation	<u>\$525.00</u>	Mode PV	<u>260-19-311-2210-282-6582</u>
Rental Car	<b></b>		Philipping
Meals	<u>\$185.25</u>	;	260-19-311-2210-282-6582
Lodging	\$800.00		260-19-311-2210-282-6582
Substitutes	<u>\$440.00</u>		260-19-311-2210-282-6113
TOTAL	<u>\$2,050.25</u>		
The District will (or)	will not  receive re	eimbursement from o	outside sources.
Purpose of travel: <b>SEMA</b>	Car Show, teacher s	sessions, and industr	ry updates
Outcomes and academic l	penefits to students and	l staff: <u>Industry up</u>	dates
The travel is necessary fo	r the implementation o	of the project funding	the travel.
	ne Bullijh		Date  9/5/18  Date
Mu	Las Byas e Superintendent/Super	intendent	

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

	ry Marnell  — ——  Language B, Category 2	SCHOOL: <u>CDO</u> Department (opt.): <u>IB</u> DATE(S): <u>November 8-11, 2018</u>				
LOCATION: Portland, Oregon						
ABSENCE: # Days	4 Sub Required: □Yes ⊠No	# of School Days Missed 2				
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	<u>\$ 744.00</u>	<u>140-19-100-2210-510-6360</u>				
Transportation	<u>\$ 700.00</u> Mode <u>airline</u>	<u>140-19-100-2210-510-6582</u>				
Rental Car	\$ 100.00 (shuttle)	140-19-100-2210-510-6582				
Meals	<u>\$ 125.25</u>	140-19-100-2210-510-6582				
Lodging	<u>\$ 600.00</u>	140-19-100-2210-510-6582				
Substitutes	<u>\$ 220.00</u>	140-19-100-2210-510-6113				
TOTAL	<u>\$2,489.25</u>					
The District will ☐ (or) will not ☒ receive reimbursement from outside sources.						
Purpose of travel: <u>IB Programme standards and practice require IB specific workshop training to ensure program objectives are put in place and maintained.</u> Subject teachers require initial training but also updated training when curriculum guides are changed.						
	redness in maintaining benchmarked i	shops include specialized in depth academic training rigor and ensure critical-thinking and reflective skills				
Submitted by:  Signature  Principal	where Dre are	Date  Date  Date				

Associate Superintendent/Superintendent