



**GOVERNING BOARD AGENDA ITEM
AMPHITHEATER UNIFIED SCHOOL DISTRICT NO. 10**

DATE OF MEETING: August 13, 2024

TITLE: Approval of Out of State Travel

BACKGROUND:

STAFF

Lauren McIntyre and Jason Weaver request permission to attend RTM West CIO Congress 2024 Education Conference on September 22-24, 2024 in Coronado, California. Approximate cost of travel is \$892.00 and will be paid using Maintenance and Operations funds. Two school days will be missed, and no substitutes are required.

Carrie Rice requests permission to attend 22nd Annual National Alliance for Medicaid in Education Conference on October 14-18, 2024 in Denver, Colorado. Approximate cost of travel is \$2,148.87 and will be paid using Maintenance and Operations funds. Five school days will be missed, and no substitutes are required.

Robert Wolf, Willow Schroeder, and Kim Moran request permission to attend Council for Exceptional Children 2025 Convention & Expo on March 12-15, 2025 in Baltimore, Maryland. Approximate cost of travel is \$6,869.01 and will be paid using Maintenance and Operations funds. Three school days will be missed, and no substitutes are required.

Todd Jaeger, Deanna Day, and Matthew Kopec request permission to attend National Association for Gifted Children National Conference on November 20-24, 2024 in Seattle, Washington. Approximate cost of travel is \$9,088.50 and will be paid using Maintenance and Operations funds. Three school days will be missed, and no substitutes are required.

Tassi Call requests permission to attend Leadership Network Summit, Chicago 2024 on September 18-20, 2024 in Chicago, Illinois. Approximate cost of travel is \$1,748.00 and will be paid using Maintenance and Operations funds. Three school days will be missed, and no substitutes are required.

Tassi Call requests permission to attend National Association for Gifted Children 2024 Conference on November 20-24, 2024 in Seattle Washington. Approximate cost of travel is \$2,829.50 and will be paid using Title I funds. Three school days will be missed, and no substitutes are required.

BUDGET CODE KEY		
001.00.100.2579.6582.510.0000	M & O	Non-Instructional Training, Employee Travel, Office of Learning and Instruction
001.00.200.2579.6360.540.0000	M & O	Non-Instructional Training, Employee Training, Student Services
001.00.200.2579.6582.540.0000	M & O	Non-Instructional Training, Employee Travel, Student Services
001.00.100.2579.6360.501.0000	M & O	Non-Instructional Training, Employee Training, Superintendent
001.00.100.2579.6360.502.0000	M & O	Non-Instructional Training, Employee Training, Governing Board
001.00.100.2579.6582.501.0000	M & O	Non-Instructional Training, Employee Travel, Superintendent
001.00.100.2579.6582.502.0000	M & O	Non-Instructional Training, Employee Travel, Governing Board
001.00.100.2579.6360.510.0000	M & O	Non-Instructional Training, Employee Training, Office of Learning and Instruction

140.25.240.2579.6360.510.0000	Title II	Non-Instructional Training, Employee Training, Office of Learning and Instruction
140.25.240.2579.6582.510.0000	Title II	Non-Instructional Training, Employee Travel, Office of Learning and Instruction

RECOMMENDATION:

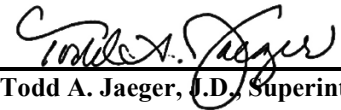
It is the recommendation of the administration that the above travel be approved.

INITIATED BY:



Matthew Munger
Associate Superintendent for Secondary Education

Date: August 12, 2024



Todd A. Jaeger, J.D., 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): Lauren McIntyre _____ SCHOOL: District Offices
Jason Weaver _____ Department (opt.): Learning & Instruction
 _____ DATE(S): September 22-24, 2024

ACTIVITY/EVENT: RTM West CIO Congress/Education Conference

LOCATION: Loews Coronado Bay Resort – 4000 Coronado Bay Rd, Coronado, CA 92118

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>
		<small>(Note: Tax credit contributions are District funds and require a budget code.)</small>
Registration	<u>Paid by RTM</u>	_____
Transportation	<u>\$700.00</u> Mode <u>air</u>	<u>001.00.100.2579.6582.510.0000</u>
Rental Car	_____	_____
Meals	<u>\$192.00</u>	<u>001.00.100.2579.6582.510.0000</u>
Lodging	<u>Paid by RTM</u>	_____
Substitutes	_____	_____
TOTAL	<u>\$892.00</u>	

The District will (or) will not receive reimbursement from outside sources.
 * PO must be submitted and approved *prior* to travel to qualify for reimbursement.

Purpose of travel: **The TRM conference provides an opportunity to listen to implementation plans and be part of discussions that are data driven and can assist us in implementation strategies for instructional technology.**

Outcomes and academic benefits to students and staff: **Conversations regarding successes and challenges with integration and infrastructure will be ideal in troubleshooting and designing strategies to improve instruction.**

Identify which characteristics of the Portrait of Graduate are specifically related to this request.

- | | | |
|---|---|---|
| <input type="checkbox"/> Caring | <input type="checkbox"/> Citizenship | <input checked="" type="checkbox"/> Collaboration |
| <input checked="" type="checkbox"/> Communication | <input checked="" type="checkbox"/> Creative Thinking | <input checked="" type="checkbox"/> Critical Thinking |
| <input checked="" type="checkbox"/> Problem-Solving | <input type="checkbox"/> Scholarship | |

The travel is necessary for the implementation of the project funding the travel.

Submitted by: Mary Thatcher _____ 7/25/24
 Signature Date

Principal/Supervisor _____ Date _____
[Signature] 7/25/24
 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): CARRIE RICE

SCHOOL: WETMORE

Department (opt.): STUDENT SERVICES

DATE(S): OCTOBER 14-18, 2024

ACTIVITY/EVENT: 22nd ANNUAL NAME CONFERENCE

LOCATION: DENVER, CO

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

EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

	<u>APPROXIMATE COST</u>		<u>BUDGET CODE/DESCRIPTION</u>
Registration	\$ <u>650.00</u>		<u>001.00.200.2579.6360.540.0000</u>
Transportation	\$ <u>343.00</u>	Mode <u>AIR</u>	<u>001.00.200.2579.6582.540.0000</u>
Rental Car	_____		_____
Meals	\$ <u>234.50</u>		<u>001.00.200.2579.6582.540.0000</u>
Lodging	\$ <u>921.37</u>		<u>001.00.200.2579.6582.540.0000</u>
Substitutes	_____		_____
TOTAL	\$<u>2148.87</u>		_____

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

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

* PO must be submitted and approved *prior* to travel to qualify for reimbursement.

Purpose of travel: **TO MEET WITH MEDICAID AND EDUCATION AGENCIES INVOLVED IN FACILITATING MEDICAID CLAIMS FOR SCHOOL BASED SERVICES.**

Outcomes and academic benefits to students and staff: **PROFESSIONAL LEARNING OPPORTUNITES, CREATING RELATIONSHIPS WITH OTHERS AND UNDERSTANDING THE MEDICAID PROCESS.**

Identify which characteristics of the Portrait of Graduate are specifically related to this request.

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> Academic Content | <input checked="" type="checkbox"/> Caring | <input checked="" type="checkbox"/> Citizenship |
| <input checked="" type="checkbox"/> Collaboration | <input checked="" type="checkbox"/> Communication | <input checked="" type="checkbox"/> Creative Thinking |
| <input checked="" type="checkbox"/> Critical Thinking | <input checked="" type="checkbox"/> Problem-Solving | |

The travel is necessary for the implementation of the project funding the travel.

Submitted by: Eileen Althouse 7/31/24
Signature Date

Kristin A. McGraw 7/31/24
Principal/Supervisor Date

[Signature] 7/31/24
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): ROBERT WOLF SCHOOL: WETMORE
WILLOW SCHROEDER Department (opt.): STUDENT SERVICES
KIM MORAN DATE(S): MARCH 12-15, 2025

ACTIVITY/EVENT: COUNCIL FOR EXCEPTIONAL CHILDREN 2025 CONVENTION & EXPO

LOCATION: BALTIMORE, MD

ABSENCE: # Days 5 Sub Required: Yes No # of School Days Missed 4
 EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

	<u>APPROXIMATE COST</u>		<u>BUDGET CODE/DESCRIPTION</u>
Registration	\$ <u>1437.00</u>		<u>001.00.200.2579.6360.540.0000</u>
Transportation	\$ <u>1931.28</u>	Mode <u>AIR</u>	<u>001.00.200.2579.6582.540.0000</u>
Rental Car	_____		_____
Meals	\$ <u>619.50</u>		<u>001.00.200.2579.6582.540.0000</u>
Lodging	\$ <u>2881.23</u>		<u>001.00.200.2579.6582.540.0000</u>
Substitutes	_____		_____
TOTAL	\$ <u>6869.01</u>		

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

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

* PO must be submitted and approved *prior* to travel to qualify for reimbursement.

Purpose of travel: **TO MEET WITH SPECIAL EDUCATION PROFESSIONALS TO LEARN, SHARE, GROW AND CONNECT. AN OPPORTUNITY TO FIND RESEARCH, TIPS AND STRATAGIES TO APPLY TO OUR SPECIAL NEEDS STUDENTS.**

Outcomes and academic benefits to students and staff: **AN OPPORTUNITY TO GATHER INFORMATION, KNOWLEDGE AND IDEAS FROM SPECIAL EDUCATION PROFESSIONALS FROM AROUND THE WORLD.**

Identify which characteristics of the Portrait of Graduate are specifically related to this request.

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> Academic Content | <input checked="" type="checkbox"/> Caring | <input checked="" type="checkbox"/> Citizenship |
| <input checked="" type="checkbox"/> Collaboration | <input checked="" type="checkbox"/> Communication | <input checked="" type="checkbox"/> Creative Thinking |
| <input checked="" type="checkbox"/> Critical Thinking | <input checked="" type="checkbox"/> Problem-Solving | |

The travel is necessary for the implementation of the project funding the travel.

Submitted by: Eileen Althouse 7/31/24
 Signature Date
Kristin A. McGraw 7/31/24
 Principal/Supervisor Date
[Signature] 7/31/24
 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): Todd A. Jaeger Deanna Day SCHOOL: District Offices
Matthew Kopec _____ Department (opt.): Sup's Office/Gov. Board
 _____ DATE(S): 11/20/24-11/24/24

ACTIVITY/EVENT: National Association for Gifted Children National Conference

LOCATION: Seattle, WA

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

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>\$2157.00</u>		<u>001.00.100.2579.6360.501/502.0000</u>
Transportation	<u>\$2000.00</u>	Mode <u>air</u>	<u>001.00.100.2579.6582.501/502.0000</u>
Rental Car	<u>\$400.00</u>		<u>001.00.100.2579.6582.501.0000</u>
Meals	<u>\$931.50</u>		<u>001.00.100.2579.6582.501/502.0000</u>
Lodging	<u>\$3600.00</u>		<u>001.00.100.2579.6582.501/502.0000</u>
Substitutes	_____		_____
TOTAL	<u>\$9088.50</u>		

The District will (or) will not receive reimbursement from outside sources.
 * PO must be submitted and approved *prior* to travel to qualify for reimbursement.
 Purpose of travel: Attend the NAGC Conference

Outcomes and academic benefits to students and staff: The conference offers an opportunity to learn about best practices, classroom strategies, and explore other issues that affect gifted students and teachers.

Identify which characteristics of the Portrait of Graduate are specifically related to this request.

<input checked="" type="checkbox"/> Academic Content	<input type="checkbox"/> Caring	<input type="checkbox"/> Citizenship
<input checked="" type="checkbox"/> Collaboration	<input type="checkbox"/> Communication	<input type="checkbox"/> Creative Thinking
<input checked="" type="checkbox"/> Critical Thinking	<input checked="" type="checkbox"/> Problem-Solving	

The travel is necessary for the implementation of the project funding the travel.

Submitted by: _____ Date _____
 Signature

 Principal/Supervisor Date

Todd A. Jaeger
 Associate Superintendent/Supervisor Date 8/6/24

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): Tassi Call _____

SCHOOL: District Offices
Department (opt.): Office of Learning & Instruction
DATE(S): September 18 - 20, 2024

ACTIVITY/EVENT: Leadership Network Summit, Chicago 2024_____

LOCATION: Chicago, Illinois

ABSENCE: # Days 3 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>\$1,200.00</u>		<u>001-00-100-2579-6360-510-0000</u>
Transportation	<u>\$445.00</u>	Mode <u>Air</u>	<u>001-00-100-2579-6582-510-0000</u>
Rental Car	_____		_____
Meals	<u>\$103.00</u>		<u>001-00-100-2579-6582-510-0000</u>
Lodging	<u>Included in registration fee</u>		
Substitutes			
TOTAL	<u>\$1,748.00</u>		

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

Purpose of travel: To attend the Leadership Network Summit in Chicago, IL

Outcomes and academic benefits to students and staff: Observe and be a part of a diverse group of influential women who have achieved extraordinary success in their educational leadership roles.

Submitted by: Tassi Call _____ 8/8/24
Signature Date

Principal/Supervisor Date
[Signature] _____ 8-8-24
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): Tassi Call

SCHOOL: Wetmore

Department (opt.): Office of Learning & Instruction

DATE(S): 11/20/24-11/24/24

ACTIVITY/EVENT: National Association for Gifted Children National Conference

LOCATION: Seattle, Washington

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>\$ 719.00</u>		<u>140.25.240.2579.6360.510</u>
Transportation	<u>\$ 600.00</u>	Mode <u>air</u>	<u>140.25.240.2579..6582.510</u>
Rental Car	_____		_____
Meals	<u>\$ 310.50</u>		<u>140.25.240.2579..6582.510</u>
Lodging	<u>\$1,200.00</u>		<u>140.25.240.2579..6582.510</u>
Substitutes	_____		_____
TOTAL	<u>\$2,829.50</u>		

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

* PO must be submitted and approved *prior* to travel to qualify for reimbursement.

Purpose of travel: Attending professional development workshops related to gifted education.

Outcomes and academic benefits to students and staff: Material learned at workshops will be shared with other REACH teachers in the district to ultimately serve gifted students.

Identify which characteristics of the Portrait of Graduate are specifically related to this request.

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> Scholarship | <input type="checkbox"/> Caring | <input type="checkbox"/> Citizenship |
| <input type="checkbox"/> Collaboration | <input type="checkbox"/> Communication | <input checked="" type="checkbox"/> Creative Thinking |
| <input checked="" type="checkbox"/> Critical Thinking | <input checked="" type="checkbox"/> Problem-Solving | |

The travel is necessary for the implementation of the project funding the travel.

Submitted by: Tassi Call 8/12/24
Signature Date

Michelle A. Jagger _____ 8/12/24
Principal/Supervisor Date
Associate Superintendent/Superintendent Date