



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

DATE OF MEETING: **January 28, 2025**

TITLE: **Approval of Out of State Travel**

BACKGROUND:

STAFF

Stephanie Hillig requests permission to attend AVID 2025 Summer Institute on June 15-18, 2025 in San Diego, California. Approximate cost of travel is \$2,654.00 and will be paid using Title II funds. No school days will be missed, and no substitutes are required.

Catherine Quinn and Morgann Bell request permission to attend AVID 2025 Summer Institute on June 15-18, 2025 in San Diego, California. Approximate cost of travel is \$4,348.00 and will be paid using Title II funds. No school days will be missed, and no substitutes are required.

Heather Callies, Shari Lossou Lossavi, Ashley Anders, Lorena Cote, and Michelle Martin request permission to attend AVID 2025 Summer Institute on June 15-18, 2025 in San Diego, California. Approximate cost of travel is \$14,892.00 and will be paid using Title I and Title II funds. No school days will be missed, and no substitutes are required.

Christopher Boknevitiz and Michelle Akins request permission to attend AVID 2025 Summer Institute on June 15-18, 2025 in San Diego, California. Approximate cost of travel is \$5,308.00 and will be paid using Title II funds. No school days will be missed, and no substitutes are required.

Kelsey Glavin, Lee Roop, Tailor West, Christine Horetski, Aurora Venhuizen, Ann McNew, Trechel Valentin, LuAnn Cox, and Abbey Klinger Akins request permission to attend AVID 2025 Summer Institute on June 15-18, 2025 in San Diego, California. Approximate cost of travel is \$22,046.00 and will be paid using Title I and Title II funds. No school days will be missed, and no substitutes are required.

Leanne Fult requests permission to attend AVID 2025 Summer Institute on June 15-18, 2025 in San Diego, California. Approximate cost of travel is \$1,834.00 and will be paid using Title I funds. No school days will be missed, and no substitutes are required.

Brianna Mounts, Elizabeth Bringardt, Danielle Swartz, Landi Roark, Brenda Mendez, and Ashlee Manley-Watson request permission to attend International Technology and Engineering Educators Association (ITEEA) Conference on April 2-5, 2025 in St. Louis, Missouri. Approximate cost of travel is \$13,505.22 and will be paid using Title II funds. No school days will be missed, and no substitutes are required.

Kimberly Begay requests permission to attend National Indian Education Association Hill Week on February 10-14, 2025 in Washington, D.C. Travel expenses will be paid by National Indian Education Association. Five school days will be missed, and no substitutes are required.

Mamie Spillane, Katie Wray, Melissa Walker, Carmen Gallegos, Amber Bourg, Sandra Bigelow, Karlie Powers, and Amanda Larriva request permission to attend AVID 2025 Summer Institute on June 15-18, 2025 in San Diego, California. Approximate cost of travel is \$17,892.00 and will be paid using Title I and Title II funds. No school days will be missed, and no substitutes are required.

Bethany Papajohn, Megan Tucker, Heather Oliver, and Caryn Wall request permission to attend AVID 2025 Summer Institute on June 15-18, 2025 in San Diego, California. Approximate cost of travel is \$9,796.00 and will be paid using Title II funds. No school days will be missed, and no substitutes are required.

Jennifer (JJ) Letts, Andrea Fyock, Julie Ramsey, Rebecca Green, Kristin Moreno, Elyse Greenberg, Rosa Armstrong, Ruth Galindo-Rosenbaum, Lauren Marlatt, Michelle Bulisache, Shelly Quevedo, Guadalupe Garmon, Brande Golden, Joyce Daigle, and Jeremy Hayes request permission to attend AVID 2025 Summer Institute on June 15-18, 2025 in San Diego, California. Approximate cost of travel is \$34,860.00 and will be paid using Title I and Title II funds. No school days will be missed, and no substitutes are required.

Stephanie Hayes and Andrea Klein request permission to attend AVID 2025 Summer Institute on June 15-18, 2025 in San Diego, California. Approximate cost of travel is \$5,208.00 and will be paid using Title II funds. No school days will be missed, and no substitutes are required.

Tara Bulleigh, Jennifer Flagg, Jordan Castle, Camille Nicely, and Kimberly Kevershan request permission to attend AVID 2025 Summer Institute on June 15-18, 2025 in San Diego, California. Approximate cost of travel is \$12,370.00 and will be paid using Title II, and Maintenance and Operations funds. No school days will be missed, and no substitutes are required.

Orante Jenkins, Rowdy Frederiksen, Emily Rios, David Garwacki, Adam Welsh, Luke Howell, Susan Steen, Shawn Garbera, and Hannah Green request permission to attend AVID 2025 Summer Institute on June 15-18, 2025 in San Diego, California. Approximate cost of travel is \$17,166.00 and will be paid using Title II, and Maintenance and Operations funds. No school days will be missed, and no substitutes are required.

David Humphreys, Monique Berry-Kelley, Cyra Sadowl, Neely Johnson, Adam Collins, Victoria Loving, Raymond Gee, Miranda Villar-Murray, Lily Erb, and Andrea Veytia request permission to attend AVID 2025 Summer Institute on June 15-18, 2025 in San Diego, California. Approximate cost of travel is \$19,640.00 and will be paid using Title II, and Maintenance and Operations funds. No school days will be missed, and no substitutes are required.

Samantha Doyle, Colby Tapling, Amy Bell, Kris Holt, Jennifer Campbell, Jamie Soto, Abigail Pierce, Lacy Tritz, Emily Kener, China Toto, Sarah Nichols, Taylor Brummels, Morgan Kerchner, Deborah Mounts, Gabriela Gonzalez, and Riley Gallmann request permission to attend AVID 2025 Summer Institute on June 15-18, 2025 in San Diego, California. Approximate cost of travel is \$37,064.00 and will be paid using Title I funds. No school days will be missed, and no substitutes are required.

Annette Orelup requests permission to attend AVID 2025 Summer Institute on June 15-18, 2025 in San Diego, California. Approximate cost of travel is \$1,674.00 and will be paid using Title II funds. No school days will be missed, and no substitutes are required.

STUDENTS

Kellie Higgins, Caitlin Grosse, Paul Avila, and James Rockow request permission to take 40 Amphi Middle School students to Project Catalina on March 4-7, 2025 in Catalina Island, California. Approximate cost of travel is \$23,760.70, and will be paid using Title I and Auxiliary funds. Four school days will be missed, and substitutes are required.

BUDGET CODE KEY		
140.25.100.2579.6360.118.0000	Title II	Non-Instructional Training, Employee Training, Copper Creek
140.25.100.2579.6582.118.0000	Title II	Non-Instructional Training, Employee Travel, Copper Creek
140.25.100.2210.6360.118.0000	Title II	Improvement of Instruction, Employee Training, Copper Creek
140.25.100.2210.6582.118.0000	Title II	Improvement of Instruction, Employee Travel, Copper Creek

100.25.100.2210.6360.110.0000	Title I	Improvement of Instruction, Employee Training, Nash
140.25.100.2579.6360.110.0000	Title II	Non-Instructional Training, Employee Training, Nash
100.25.100.2210.6582.110.0000	Title I	Improvement of Instruction, Employee Travel, Nash
140.25.100.2579.6582.110.0000	Title II	Non-Instructional Training, Employee Travel, Nash
140.25.100.2210.6360.167.0000	Title II	Improvement of Instruction, Employee Training, Cross
140.25.100.2579.6360.167.0000	Title II	Non-Instructional Training, Employee Training, Cross
140.25.100.2210.6582.167.0000	Title II	Improvement of Instruction, Employee Travel, Cross
140.25.100.2579.6582.167.0000	Title II	Non-Instructional Training, Employee Travel, Cross
100.25.100.2210.6360.108.0000	Title I	Improvement of Instruction, Employee Training, Holaway
140.25.100.2210.6360.108.0000	Title II	Improvement of Instruction, Employee Training, Holaway
100.25.100.2579.6360.108.0000	Title I	Non-Instructional Training, Employee Training, Holaway
100.25.100.2210.6582.108.0000	Title I	Improvement of Instruction, Employee Travel, Holaway
140.25.100.2210.6582.108.0000	Title II	Improvement of Instruction, Employee Travel, Holaway
100.25.100.2579.6582.108.0000	Title I	Non-Instructional Training, Employee Travel, Holaway
100.25.100.2210.6360.116.0000	Title I	Improvement of Instruction, Employee Training, Mesa Verde
100.25.100.2210.6582.116.0000	Title I	Improvement of Instruction, Employee Travel, Mesa Verde
140.25.100.2210.6360.510.0000	Title II	Improvement of Instruction, Employee Training, Office of Learning & Instruction
140.25.100.2210.6582.510.0000	Title II	Improvement of Instruction, Employee Travel, Office of Learning and Instruction
100.25.100.2210.6360.117.0000	Title I	Improvement of Instruction, Employee Training, Rio Vista
140.25.100.2210.6360.117.0000	Title II	Improvement of Instruction, Employee Training, Rio Vista
100.25.100.2579.6360.117.0000	Title I	Non-Instructional Training, Employee Training, Rio Vista
100.25.100.2210.6582.117.0000	Title I	Improvement of Instruction, Employee Travel, Rio Vista
140.25.100.2210.6582.117.0000	Title II	Improvement of Instruction, Employee Travel, Rio Vista
100.25.100.2579.6582.117.0000	Title I	Non-Instructional Training, Employee Travel, Rio Vista
140.25.100.2210.6360.114.0000	Title II	Improvement of Instruction, Employee Training, Painted Sky
140.25.100.2579.6360.114.0000	Title II	Non-Instructional Training, Employee Training, Painted Sky
140.25.100.2210.6582.114.0000	Title II	Improvement of Instruction, Employee Travel, Painted Sky
140.25.100.2579.6582.114.0000	Title II	Non-Instructional Training, Employee Travel, Painted Sky
100.25.100.2579.6360.115.0000	Title I	Non-Instructional Training, Employee Training, Coronado
100.25.100.2210.6360.115.0000	Title I	Improvement of Instruction, Employee Training, Coronado

140.25.100.2210.6360.115.0000	Title II	Improvement of Instruction, Employee Training, Coronado
100.25.100.2579.6582.115.0000	Title I	Non-Instructional Training, Employee Travel, Coronado
100.25.100.2210.6582.115.0000	Title I	Improvement of Instruction, Employee Travel, Coronado
140.25.100.2210.6582.115.0000	Title II	Improvement of Instruction, Employee Travel, Coronado
140.25.100.2210.6360.107.0000	Title II	Improvement of Instruction, Employee Training, Harelson
140.25.100.2579.6360.107.0000	Title II	Non-Instructional Training, Employee Training, Harelson
140.25.100.2210.6582.107.0000	Title II	Improvement of Instruction, Employee Travel, Harelson
140.25.100.2579.6582.107.0000	Title II	Non-Instructional Training, Employee Travel, Harelson
140.25.100.2210.6360.282.0000	Title II	Improvement of Instruction, Employee Training, CDO
140.25.100.2579.6360.282.0000	Title II	Non-Instructional Training, Employee Training, CDO
001.00.100.2210.6360.282.0000	M & O	Improvement of Instruction, Employee Training, CDO
140.25.100.2210.6582.282.0000	Title II	Improvement of Instruction, Employee Travel, CDO
140.25.100.2579.6582.282.0000	Title II	Non-Instructional Training, Employee Travel, CDO
001.00.100.2210.6582.282.0000	M & O	Improvement of Instruction, Employee Travel, CDO
140.25.100.2210.6360.280.0000	Title II	Improvement of Instruction, Employee Training, CDO
001.00.100.2579.6360.280.0000	M & O	Non-Instructional Training, Employee Training, CDO
140.25.100.2210.6582.280.0000	Title II	Improvement of Instruction, Employee Travel, CDO
001.00.100.2579.6582.280.0000	M & O	Non-Instructional Training, Employee Travel, CDO
140.25.100.2210.6360.165.0000	Title II	Improvement of Instruction, Employee Training, La Cima
001.00.100.2210.6360.165.0000	M & O	Improvement of Instruction, Employee Training, La Cima
001.00.100.2579.6360.165.0000	M & O	Non-Instructional Training, Employee Training, La Cima
140.25.100.2210.6582.165.0000	Title II	Improvement of Instruction, Employee Travel, La Cima
001.00.100.2210.6582.165.0000	M & O	Improvement of Instruction, Employee Travel, La Cima
001.00.100.2579.6582.165.0000	M & O	Non-Instructional Training, Employee Travel, La Cima
100.25.100.2210.6360.111.0000	Title I	Improvement of Instruction, Employee Training, Prince
100.25.100.2579.6360.111.0000	Title I	Non-Instructional Training, Employee Training, Prince
100.25.100.2210.6582.111.0000	Title I	Improvement of Instruction, Employee Travel, Prince
100.25.100.2579.6582.111.0000	Title I	Non-Instructional Training, Employee Travel, Prince
140.25.100.2579.6360.109.0000	Title II	Non-Instructional Training, Employee Training, Keeling
140.25.100.2579.6582.109.0000	Title II	Non-Instructional Training, Employee Travel, Keeling
100.25.100.1001.6892.166.0000	Title I	Classroom Instruction, Student Expenses, AMS
525.00.410.2710.6519.166.0000	Auxiliary	Student Transportation, Student Travel, AMS
100.25.100.2190.6892.166.0000	Title I	Student Support Services, Student Expenses, AMS
100.25.100.1001.6105.166.0000	Title I	Classroom Instruction, Substitutes, AMS

RECOMMENDATION:

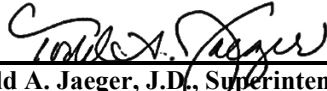
It is the recommendation of the administration that the above travel be approved.

INITIATED BY:



Matthew Munger
Associate Superintendent for Secondary Education

Date: January 21, 2025



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): Stephanie Hillig

SCHOOL: School / Site: Copper Creek Elementary

Department (opt.): _____

DATE(S): 6/15-6/18/2025

ACTIVITY/EVENT: AVID

LOCATION: San Diego California

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

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>\$1,050.00</u>		<u>140.25.100.2579.6360.118.0000</u>
Transportation	<u>\$ 480.00</u>	Mode <u>air</u>	<u>140.25.100.2579.6582.118.0000</u>
Meals	<u>\$ 224.00</u>		<u>140.25.100.2579.6582.118.0000</u>
Lodging	<u>\$ 900.00</u>		<u>140.25.100.2579.6582.118.0000</u>
Substitutes	_____		_____
TOTAL	<u>\$2,654.00</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.

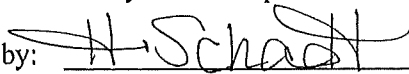
Purpose of travel: AVID training

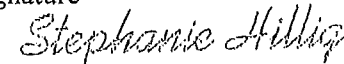
Outcomes and academic benefits to students and staff: Training for staff to implement AVID strategies.

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

- | | | |
|-----------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------|
| <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 | <input checked="" type="checkbox"/> Scholarship | |

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

Submitted by:  6/14/25
Signature Date



Principal/Supervisor

Date


Associate Superintendent/Supervisor

Date

6/14/25
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): Catherine Quinn
Morgann Bell (White)

SCHOOL: School / Site: Copper Creek Elementary

Department (opt.): _____

DATE(S): 6/15-6/18/2025

ACTIVITY/EVENT: AVID

LOCATION: San Diego California

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

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>\$2,100.00</u>		<u>140.25.100.2210.6360.118.0000</u>
Transportation	<u>\$ 900.00</u>	Mode <u>air</u>	<u>140.25.100.2210.6582.118.000</u>
Meals	<u>\$ 448.00</u>		<u>140.25.100.2210.6582.118.0000</u>
Lodging	<u>\$ 900.00</u>		<u>140.25.100.2210.6582.118.0000</u>
Substitutes	_____		_____
TOTAL	<u>\$4,348.00</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: AVID training

Outcomes and academic benefits to students and staff: Training for staff to implement AVID strategies.

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

- | | | |
|-----------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------|
| <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 | <input checked="" type="checkbox"/> Scholarship | |

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

Submitted by: _____

Signature

1.18.25
Date

Stephanie Hillig

Principal/Supervisor

Date

[Signature]

Associate Superintendent/Superintendent

Date

1/14/25
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): Jessica Jarrett, Melanie Derksen, Kristen Alvarez SCHOOL: EC Nash Elementary School

Heather Callies, Shari Lossou Lossavi Department (opt.): _____

Ashley Anders, Lorena Cote, Michelle Martin DATE(S): June 15th – 18th

ACTIVITY/EVENT: AVID Summer Institute

LOCATION: San Diego, California

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

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>7350.00</u>		<u>100.25.100.2210.6360.110.000</u>
	<u>1050.00</u>		<u>140.25.100.2579.6360.110.000</u>
Transportation	<u>2800.00/</u>	Mode <u>air/car</u>	<u>100.25.100.2210.6582.110.0000 /</u>
	<u>400.00 /</u>		<u>140.25.100.2579.6582.110.0000</u>
Rental Car	_____		_____
Meals	<u>1568.00/</u>		<u>100.25.100.2210.6582.110.0000 /</u>
	<u>224.00/</u>		<u>140.25.100.2579.6582.110.0000</u>
Lodging	<u>1200.00/</u>		<u>100.25.100.2210.6582.110.0000 /</u>
	<u>300.00 /</u>		<u>140.25.100.2579.6582.110.0000</u>
TOTAL	<u>\$14,892.00</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: **Participation in AVID Summer Institute Professional Development**

Outcomes and academic benefits to students and staff: **Participants will strengthen their understanding of AVID implementation on their campus and learn valuable best practice strategies to ensure rigorous implementation towards AVID school-wide programs.**

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

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

Submitted by: Susan Campbell 1-13-25
 Signature Date

[Signature] 1-13-25
 Principal/Supervisor Date

[Signature] 1/13/25
 Associate Superintendent/Supintendent 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): Christopher Boknevit _____ SCHOOL: Cross Middle School
Michelle Akins _____ Department (opt.): _____
 _____ DATE(S): June 15-18, 2025

ACTIVITY/EVENT: AVID 2025 Summer Institute

LOCATION: San Diego, California

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>
Registration	<u>\$2,100.00</u>		<u>140.25.100.2210/2579.6360.167.0000</u>
Transportation	<u>\$ 960.00</u>	Mode <u>Airfare</u>	<u>140.25.100.2210/2579.6582.167.0000</u>
Meals	<u>\$ 448.00</u>		<u>140.25.100.2210/2579.6582.167.0000</u>
Lodging	<u>\$1,800.00</u>		<u>140.25.100.2210/2579.6582.167.0000</u>
Substitutes	<u>\$0.00</u>		_____
TOTAL	<u>\$5,308.00</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: To participate in AVID Summer Institute professional development.

Outcomes and academic benefits to students and staff: Participants will strengthen their understanding of AVID implementation and learn valuable best practice strategies to ensure rigorous implementation toward AVID district-wide.

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

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

Submitted by: _____ 1-16-25
 Signature _____ Date
 _____ 1/16/25
 Principal/Supervisor _____ Date
 _____ 1/16/25
 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): Kelsey Ryan Glavin Lee Roop SCHOOL: Holaway
Tailor Ann West Christine Marie Horetski DATE(S): 06/15/2025 - 06/18/2025
Aurora Del Carmen Venhuizen Ann Frances McNew
Trecel Elizabeth Valentin Lu Ann Cox, Abbey Marie Klinger

ACTIVITY/EVENT: 2025 AVID Summer Institute

LOCATION: San Diego, CA

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>
Registration	<u>\$1,050 x 6 = \$6,300.00</u>	<u>100.25.100.2210.6360.108.0000</u>
	<u>\$1,050 x 2 = \$2,100.00</u>	<u>140.25.100.2210.6360.108.0000</u>
	<u>\$1,050 x 1 = \$1,050.00</u>	<u>100.25.100.2579.6360.108.0000</u>
Transportation	<u>\$720 x 6 = \$4,320.00</u> Mode <u>Air</u>	<u>100.25.100.2210.6582.108.0000</u>
	<u>\$440 x 2 = \$960.00</u> Mode <u>Air</u>	<u>140.25.100.2210.6582.108.0000</u>
	<u>\$800 x 1 = \$800.00</u> Mode <u>Air</u>	<u>100.25.100.2579.6582.108.0000</u>
Meals	<u>\$224 x 6 = \$1,344.00</u>	<u>100.25.100.2210.6582.108.0000</u>
	<u>\$224 x 2 = \$448.00</u>	<u>140.25.100.2210.6582.108.0000</u>
	<u>\$224 x 1 = \$224.00</u>	<u>100.25.100.2579.6582.108.0000</u>
Lodging	<u>\$900 x 2 = \$1,800.00</u>	<u>100.25.100.2210.6582.108.0000</u>
	<u>\$900 x 2 = \$1,800.00</u>	<u>140.25.100.2210.6582.108.0000</u>
	<u>\$900 x 1 = \$900.00</u>	<u>100.25.100.2579.6582.108.0000</u>
TOTAL	<u>\$22,046.00</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: 2025 Avid Summer Conference

Outcomes and academic benefits to students and staff: Participants will strengthen their understanding of AVID implementation on their campus and learn valuable best practice strategies to ensure rigorous implementation toward AVID school-wide.

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: Donna Conrad 1/16/25
 Signature Date
Trechel Valentin
 Principal/Supervisor 1/16/25
 Date
Jessie Call
 Associate Superintendent/Superintendent 1/17/25
 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): Leanne Fult

SCHOOL: Mesa Verde

Department (opt.):

DATE(S): June 15-18, 2025

ACTIVITY/EVENT: AVID 2025 Summer Institute

LOCATION: San Diego, California

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>\$1,050.00</u>	<u>100.25.100.2210.6360.116.0000</u>
Transportation	<u>\$ 560.00</u> Mode <u>air</u>	<u>100.25.100.2210.6582.116.0000</u>
Meals	<u>\$ 224.00</u>	<u>100.25.100.2210.6582.116.0000</u>
Lodging	<u>\$ 0</u>	<u>(sharing a room)</u>
Substitutes	_____	_____
TOTAL	<u>\$1,834.00</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: to participate in AVID Summer Institute Professional Development

Outcomes and academic benefits to students and staff: Participants will strengthen their understanding of AVID implementation on their campus and learn valuable best practice strategies to ensure rigorous implementation toward AVID school-wide.

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: Dacia Pike 1-14-25
 Signature Date
[Signature] 1-14-25
 Principal/Supervisor Date
[Signature] 1/14/25
 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): Brianna Mounts Elizabeth Brungardt SCHOOL: Innovation Academy and Keeling
Danielle Swartz Landi Roark Department (opt.): Office of Learning & Instruction
Brenda Mendez Ashlee Manley-Watson DATE(S): April 2-5, 2025

ACTIVITY/EVENT: International Technology and Engineering Educators Association (ITEEA) Conference

LOCATION: St. Louis, Missouri

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>
	<small>(Note: Tax credit contributions are District funds and require a budget code.)</small>
Registration <u>\$4,074.00</u>	<u>140-25-100-2210-6360-510-0000</u>
Transportation <u>\$3,600.00</u> Mode <u>air</u>	<u>140-25-100-2210-6582-510-0000</u>
Rental Car <u> </u>	<u> </u>
Meals <u>\$1,134.00</u>	<u>140-25-100-2210-6582-510-0000</u>
Lodging <u>\$2,087.22</u>	<u>140-25-100-2210-6582-510-0000</u>
Substitutes <u>\$2,610.00</u>	<u>140-25-100-2210-6582-510-0000</u>
TOTAL <u>\$13,505.22</u>	

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

Purpose of travel: To attend the International Technology and Engineering Educators Association (ITEEA) Conference.

Outcomes and academic benefits to students and staff: The annual ITEEA conference provides an unparalleled opportunity for technology and engineering educators to gain comprehensive professional development and networking experiences. This is a unique opportunity to learn from and share with other technology and engineering STEM education professionals in a variety of formats. Attendance at this conference will benefit all staff and students at Innovation and Keeling.

Submitted by: _____ Date _____
 Signature

Principal/Supervisor _____ Date 12/10/24
 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): Kimberly Begay

SCHOOL: District Offices

Department (opt.): Native American Education

DATE(S): February 10-14, 2025

ACTIVITY/EVENT: National Indian Education Association Hill Week

LOCATION: Washington, DC

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

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>Paid by National Indian Education Association (NIEA)</u>	<u>N/A</u>
Transportation	<u>Paid by NIEA</u> Mode _____	<u>N/A</u>
Rental Car	_____	_____
Meals	<u>Paid by NIEA</u>	<u>N/A</u>
Lodging	<u>Paid by NIEA</u>	<u>N/A</u>
Substitutes	_____	_____
TOTAL	<u>\$0.00</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: To advocate for the priorities of Native students and Native communities across the nation, emphasizing the importance of education sovereignty across the federal government.

Outcomes and academic benefits to students and staff: NAEP staff will network and engage with Congressional partners to take stock of the current landscape of Native education that will benefit Amphi Native students.

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:

Kimberly Begay
Signature

January 10, 2025
Date

Marlene Marsucci
Principal/Supervisor

1/13/2025
Date

[Signature]
Associate Superintendent/Superintendent

1/16/2025
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): Mamie Spillane Katie Wray Melissa Walker Carmen Gallegos Amber Bourg Sandra Bigelow
Karlie Powers, Amanda Larriva SCHOOL: Rio Vista Elementary

DATE(S): 06/15/2025-06/18/2025

ACTIVITY/EVENT: 2025 AVID Summer Institute

LOCATION: San Diego, California

ABSENCE: 4 # Days Sub Required: Yes No

0 # of School Days Missed

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>\$1,050x5=\$5250.00</u>	<u>100.25.100.2210.6360.117.0000</u>
<u>\$1,050x2=\$2100.00</u>	<u>140.25.100.2210.6360.117.0000</u>
<u>\$1050x1=\$1050.00</u>	<u>100.25.100.2579.6360.117.0000</u>
Transportation <u>\$400x5=\$2000.00</u> Mode <u>AIR</u>	<u>100.25.110.2210.6582.117.0000</u>
<u>\$400x2=\$800.00</u> Mode <u>AIR</u>	<u>140.25.100.2210.6582.117.0000</u>
<u>\$400x1=\$400.00</u> Mode <u>AIR</u>	<u>100.25.100.2579.6582.117.0000</u>
Meals <u>\$224x5=\$1120.00</u>	<u>100.25.110.2210.6582.117.0000</u>
<u>\$224x2=\$448</u>	<u>140.25.100.2210.6582.117.0000</u>
<u>\$224x1=\$224</u>	<u>100.25.100.2579.6582.117.0000</u>
Lodging <u>\$300x3=\$900.00</u>	<u>100.25.110.2210.6582.117.0000</u>
<u>\$300x3=\$900.00</u>	<u>140.25.100.2210.6582.117.0000</u>
<u>\$300x3=\$900.00</u>	<u>100.25.100.2579.6582.117.0000</u>
<u>\$300x3=900.00</u>	<u>100.25.100.2579.6582.117.0000</u>
<u>\$300x3=\$900.00</u>	<u>100.25.100.2579.6582.117.0000</u>
TOTAL <u>\$17,892.00</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: 2025 AVID Summer Conference

Outcomes and academic benefits to students and staff: Participants will strengthen their understanding of AVID implementation on their campus and learn valuable best practice strategies to ensure rigorous implementation toward AVID school wide.

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: MUST BE HAND SIGNED

D Garcia
Signature
Ms. D Garcia
Principal/Supervisor
[Signature]
Associate Superintendent/Superintendent

1/22/2025
Date
1/22/2025
Date
1/22/25
Date rev. 6/1/2022

**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): Bethany Papajohn Megan Tucker SCHOOL: Painted Sky Elementary
Heather Oliver Caryn Wall Department (opt.): _____
 _____ DATE(S): 6/15/25-6/18/25

ACTIVITY/EVENT: 2025 AVID Summer Institute

LOCATION: San Diego, CA

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>\$3,150.00</u> <u>\$1,050.00</u>	<u>140.25.100.2210.6360.114.0000</u> <u>140.25.100.2579.6360.114.0000</u>
Transportation	<u>\$1,500.00</u> <u>\$ 500.00</u>	Mode <u>Airplane/Uber</u> <u>140.25.100.2210.6582.114.0000</u> Mode <u>Airplane/Uber</u> <u>140.25.100.2579.6582.114.0000</u>
Rental Car	<u>0</u>	_____
Meals	<u>\$672.00</u> <u>\$224.00</u>	<u>140.25.100.2210.6582.114.0000</u> <u>140.25.100.2579.6582.114.0000</u>
Lodging	<u>\$1,800.00</u> <u>\$ 900.00</u>	<u>140.25.100.2210.6582.114.0000</u> <u>140.25.100.2579.6582.114.0000</u>
Substitutes	<u>0</u>	_____
TOTAL	<u>\$9,796.00</u>	

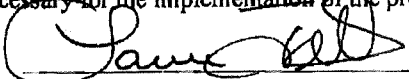


The District will (or) will not receive reimbursement from outside sources.
 * PO must be submitted and approved **prior** to travel to qualify for reimbursement.
 Purpose of travel: To participate in AVID Summer Institute professional development.

Outcomes and academic benefits to students and staff: Participants will strengthen their understanding of AVID implementation and learn valuable best practice strategies to ensure rigorous implementation toward AVID district-wide.

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

- | | | |
|-----------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------|
| <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 | <input checked="" type="checkbox"/> Scholarship | |

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

Submitted by:  1/17/25
 Signature Date
 1/17/25
 Principal/Supervisor Date
 1/17/25
 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): JJ Letts, Andrea Fyock, Julie Ramsey, Rebecca Green, Kristin Moreno, Elyse Greenberg, Rosa Armstrong,
Ruth Galindo-Rosenbaum, Lauren Marlatt, Michelle Bullsache, Shelley Quevedo, Guadalupe Garmon, Brande Golden, Joyce
Daigle, Jeremy Hayes SCHOOL: Coronado

DATE(S): June 16-18, 2025

ACTIVITY/EVENT: 2025 Advancement Via Individual Determination (AVID) Summer Institute

LOCATION: San Diego, CA

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		
	3,150.00	100.25.100.2579.6360.115.0000 (Non-Instructional)
	10,500.00	100.25.100.2210.6360.115.0000 (Instructional)
	2,100.00	140.25.100.2210.6360.115.0000 (Instructional)
Transportation	(Flights, Ground Transport, Parking)	
	1,350.00	100.25.100.2579.6582.115.0000 (Non-Instructional)
	4,500.00	100.25.100.2210.6582.115.0000 (Instructional)
	900.00	140.25.100.2210.6582.115.0000 (Instructional)
Rental Car	0	
Meals		
	672.00	100.25.100.2579.6582.115.0000 (Non-Instructional)
	2,240.00	100.25.100.2210.6582.115.0000 (Instructional)
	448.00	140.25.100.2210.6582.115.0000 (Instructional)
Lodging		
	2,700.00	100.25.100.2579.6582.115.0000 (Non-Instructional)
	4,500.00	100.25.100.2210.6582.115.0000 (Instructional)
	1,800.00	140.25.100.2210.6582.115.0000 (Instructional)
Substitutes	0	
TOTAL	\$34,860.00 =====	

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

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

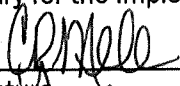
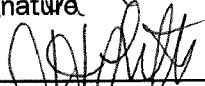
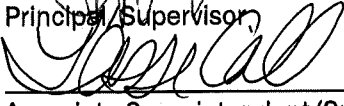
Purpose of travel: To participate in AVID Summer Institute Professional Development

Outcomes and academic benefits to students and staff: Participants will strengthen their understanding of AVID implementation on our campus and learn valuable best practice strategies to ensure rigorous implementation toward AVID School-Wide.

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

- | | | |
|-----------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------|
| <input 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 | <input type="checkbox"/> Scholarship | |

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

Submitted by: <u></u>	<u>1-21-25</u>
Signature	Date
<u></u>	<u>1/21/25</u>
Principal/Supervisor	Date
<u></u>	<u>1/21/25</u>
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): Stephanie Hayes
Andrea Klein

SCHOOL: Harelson Elementary
Department (opt.): _____

DATE(S): June 15, 2025-June18, 2025

ACTIVITY/EVENT: AVID Summer Institute

LOCATION: San Diego, California

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>\$2,100.00</u>		<u>140.25.100.2210/2579.6360.107.0000</u>
Transportation	<u>\$1,000.00</u>	Mode <u>Air</u>	<u>140.25.100.2210/2579.6582.107.0000</u>
Rental Car	_____		_____
Meals	<u>\$448.00</u>		<u>140.25.100.2210/2579.6582.107.0000</u>
Lodging	<u>\$1,800.00</u>		<u>140.25.100.2210/2579.6582.107.0000</u>
Substitutes	_____		_____
TOTAL	<u>\$5,208</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: AVID Summer Institute

Outcomes and academic benefits to students and staff: Participants will strengthen their understanding of AVID implementation and learn valuable best practices to ensure rigorous implementation toward AVID school-wide.

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 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: _____

Signature

Date

Stephanie Hayes
Principal/Supervisor

1/21/25
Date

[Signature]
Associate Superintendent/Superintendent

1/21/25
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): Tara Bulleigh Jennifer Flagg SCHOOL: Canyon del Oro High School
Jordan Castle Camille Nicely Department (opt.): _____
Kimberly Kevershan DATE(S): June 15-18, 2025

ACTIVITY/EVENT: AVID 2025 Summer Institute

LOCATION: San Diego, California

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>
Registration	<u>\$1050 x 4 = \$4200.00</u> <u>\$1050 x 1 = \$1050.00</u>	<u>140.25.100.2210.2579.6360.282.0000</u> <u>001.00.100.2210.6360.282.0000</u>
Transportation	<u>\$ 480 x 4 = \$1920.00</u> Mode <u>Airfare/car</u> <u>\$ 480 x 1 = \$ 480.00</u>	<u>140.25.100.2210/2579.6582.282.0000</u> <u>001.00.100.2210.6582.282.0000</u>
Meals	<u>\$ 224.00 x 4 = \$ 896.00</u> <u>\$ 224.00 x 1 = \$ 224.00</u>	<u>140.25.100.2210/2579.6582.282.0000</u> <u>001.00.100.2210.6582.282.0000</u>
Lodging	<u>\$ 900 x 3 = 2700.00</u> <u>\$ 900 x 1 = \$ 900.00</u>	<u>140.25.100.2210/2579.6582.282.0000</u> <u>001.00.100.2210.6582.282.0000</u>
Substitutes	<u>\$0.00</u>	_____
TOTAL	<u>\$12,370.00</u>	

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

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

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

Purpose of travel: To participate in AVID Summer Institute professional development.

Outcomes and academic benefits to students and staff: Participants will strengthen their understanding of AVID implementation and learn valuable best practice strategies to ensure rigorous implementation toward AVID district-wide.

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

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

Submitted by: [Signature] 1/23/25
Signature Date

Tara Bulleigh 1/23/25
Principal/Supervisor Date

[Signature] 1/23/25
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): Orante Jenkins Rowdy Frederiksen SCHOOL: Ironwood Ridge High School
 Emily Rios David Garwacki Department (opt.): _____
 Adam Welsh, Luke Howell, Susan Steen
 Shawn Garbera, Hannah Greene, DATE(S): June 15, 2025-June 18, 2025

ACTIVITY/EVENT: AVID Summer Institute 2025

LOCATION: San Diego, CA

ABSENCE: # Days 0 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	\$4,200.00		140.25.100.2210.6360.280.0000
	<u>\$5,250.00</u>		001.00.100.2579.6360.280.0000
	\$9,450.00		
Transportation	\$1,600.00	Mode <u>Air</u>	140.25.100.2210.6582.280.0000
	<u>\$2,000.00</u>		001.00.100.2579.6582.280.0000
	\$3,600.00		
Rental Car	<u>\$0.00</u>		
Meals	\$1,120.00		001.00.100.2210.6582.280.0000
	<u>\$896.00</u>		140.25.100.2579.6582.280.0000
	\$2,016.00		
Lodging	\$1,200.00		001.00.100.2210.6892.280.0000
	<u>\$900.00</u>		140.25.100.2579.6582.280.0000
	\$2,100.00		
Substitutes	_____		
TOTAL	<u>\$17,166.00</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: Professional Development

Outcomes and academic benefits to students and staff: AVID helps teachers shift from delivering content facilitating learning, resulting in an inquiry-based, student-centric classroom

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

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

Submitted by:

Nancy J. Jewell
Signature

1/24/2025

Date

[Signature]
Principal/Supervisor

1-24-25

Date

[Signature]
Associate Superintendent/Superintendent

1/24/2025

Date

rev. 6/1/2022

**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): David Humphreys Monique Berry-Kelley
Cyra Sadowl Neely Johnson, Adam Collins, Victoria Loving
Raymond Gee, Miranda Villar-Murray, Lily Erb, Andrea Veytia

SCHOOL: La Cima Middle School

Department (opt.): _____

DATE(S): 6/15-6/18/25

ACTIVITY/EVENT: AVID Summer Institute

LOCATION: San Diego, CA

ABSENCE: # Days 4 Sub Required: Yes No

of School Days Missed 0

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>\$10,500.00</u>		<u>140.25.100.2210.6360.165.0000</u> <u>001.00.100.2210/2579.6360.165.0000</u>
Transportation	<u>\$4,800.00</u>	Mode <u>Air</u>	<u>140.25.100.2210.6582.165.0000</u> <u>001.00.100.2210/2579.6582.165.0000</u>
Meals	<u>\$2,240.00</u>		<u>140.25.100.2210.6582.165.0000</u> <u>001.00.100.2210/2579.6582.165.0000</u>
Lodging	<u>\$2,100.00</u>		<u>140.25.100.2210.6582.165.0000</u> <u>001.00.100.2210/2579.6582.165.0000</u>
Substitutes	_____		
TOTAL	<u>\$19,640.00</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: To attend AVID summer institute

Outcomes and academic benefits to students and staff: To better impliment AVID practices.

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

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

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

Submitted by: _____

Signature

1/21/2025

Date

Principal/Supervisor

1/21/2025

Date

Associate Superintendent/Supintendent

1/29/2025
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): Samantha Doyle, Colby Tapling, Amy Bell SCHOOL: Prince Elementary
Kris Holt, Jennifer Campbell, Jamie Soto, Abigail Pierce Department (opt.): Office of Learning & Instruction
Lacy Tritz, Emily Kener, China Toto, Sarah Nichols, Taylor Brummels, DATE(S): June 15-18, 2025
Morgan Kerchner, Deborah Mounts, Gabriela Gonzalez, Riley Gallmann

ACTIVITY/EVENT: AVID 2025 Summer Institute

LOCATION: San Diego, California

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>
			<small>(Note: Tax credit contributions are District funds and require a budget code.)</small>
Registration	<u>\$16,800.00</u>		<u>100.25.100.2210/2579.6360.111.0000</u>
Transportation	<u>\$ 7,680.00</u>	Mode <u>air</u>	<u>100.25.100.2210/2579.6360.111.0000</u>
Meals	<u>\$ 3,584.00</u>		<u>100.25.100.2210/2579.6360.111.0000</u>
Lodging	<u>\$9,000.00</u>		<u>100.25.100.2210/2579.6360.111.0000</u>
Substitutes	_____		_____
TOTAL	<u>\$37,064.00</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: To participate in AVID Summer Institute professional development.

Outcomes and academic benefits to students and staff: Participants will strengthen their understanding of AVID implementation and learn valuable best practice strategies to ensure rigorous implementation toward AVID district-wide.

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 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: Mary Thatcher _____ 1/24/25
 Signature Date
S Doyle _____ 1/24/25
 Principal/Supervisor Date
Gasi Call _____ 1/24/25
 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):

SCHOOL: Keeling

Annette Orelup

Department (opt.):

DATE(S): June 15-18, 2025

ACTIVITY/EVENT: AVID Summer Institute - PD

LOCATION: San Diego, CA

ABSENCE: # Days 4 Sub Required: Yes No

of School Days Missed na

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>\$1050</u>		<u>140.25.100.2579.6360.109.0000</u>
Transportation	<u>\$400</u>	Mode Air & Taxi	<u>140.25.100.2579.6582.109.0000</u>
Parking	<u> </u>	Airport & Mileage	<u>140.25.100.2579.6582.109.0000</u>
Meals	<u>\$224</u>		<u>140.25.100.2579.6582.109.0000</u>
Lodging	<u> </u>		<u>140.25.100.2579.6582.109.0000</u>
TOTAL	<u>\$1674</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.

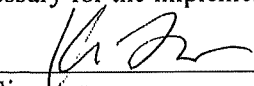
Purpose of travel: Participation in AVID Summer Institute for Professional Development.


Outcomes and academic benefits to students and staff: **Strengthen understanding of AVID implementation on school site and learn best practice strategies to ensure effective implementation of AVID.**


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 type="checkbox"/> Critical Thinking | <input type="checkbox"/> Problem-Solving | |

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

Submitted by:  1/24/25
Signature Date

 1/24/25
Principal/Supervisor Date

 1/24/25
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: AMS

ESTIMATED NUMBER OF STUDENTS: 40

NAME OF SCHOOL GROUP/CLUB/ENTITY: Project Catalina

STAFF ADVISOR(S)/CHAPERONES: Kellie Higgins, Caitlin Grosse, Paul Avila, James Rockow

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

ACTIVITY / EVENT / PURPOSE OF TRAVEL: Trip to Catalina Island Marine Institute (CIMI)

DESTINATION OF TRAVEL: Catalina Island, California

DATES OF TRAVEL: 3/04/2025-3/07/2005

ACADEMIC BENEFITS TO STUDENTS: Extension of science curriculum, topics include marine biology, oceanography, astronomy, ecology, biodiversity, data collection and data analysis.

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

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

PROPOSED METHOD OF TRANSPORTATION:

District-owned vehicles

Transportation approval: _____

X Other Charter Bus

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

Parent Organization _____

EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

	APPROX. COST	BUDGET CODE
Registration	<u>\$12,375.00</u>	<u>100.25.100.1001.6892.166.0000</u>
Transportation	<u>\$7,185.70</u>	<u>525.00.410.2710.6519.166.0000</u>
Meals	<u>\$300.00</u>	<u>100.25.100.2190.6892.166.0000</u>
Lodging	<u>\$2,100.00</u>	<u>100.25.100.2190.6892.166.0000</u>
Substitutes	<u>\$1,800.00</u>	<u>100.25.100.1001.6105.166.0000</u>
TOTAL	<u>\$23,760.70</u>	

WILL THE DISTRICT RECEIVE REIMBURSEMENT? **Yes**
IF SO, SOURCE & AMOUNTS: **Student Tuition and Tax Credit Donations**
* PO must be submitted and approved *prior* to travel to qualify for reimbursement.

HOW ARE CHAPERONE EXPENSES PAID? **Included in Student Cost**

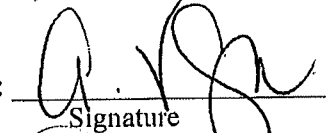
COST TO EACH STUDENT \$ **675.00**

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? **Scholarships are made available to those student who need them.**

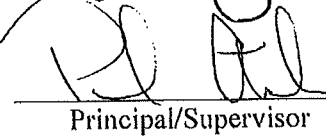
FUNDING SOURCE(S): **Tax Credit Donations**

FUNDRAISING ACTIVITIES PLANNED (If applicable):

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

SUBMITTED BY: 
Signature

1/14/25
Date

APPROVED BY: 
Principal/Supervisor

1/14/25
Date



1/21/25