

**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: La Cima

ESTIMATED NUMBER OF STUDENTS: 40

NAME OF SCHOOL GROUP/CLUB/ENTITY: Science

STAFF ADVISOR(S)/CHAPERONES: Julie Valenzuela, Katrina Schleicher, Keri Amedeo, Pamela Vandivort, Alex Busby, Deitrick Smart, Suzanne Graun -Alternates: Debbie Garcia, Alexis Gonzalez, Bonnie Keene, Corrine Blum

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

ACTIVITY / EVENT / PURPOSE OF TRAVEL: Catalina Island Marine Institute Science Enrichment Trip: student groups will be participating in a Trivia Challenge focusing on the Life Science Standards taught during labs and various activities. Prizes will be awarded to the top student participants.

DESTINATION OF TRAVEL: Catalina Island Marine Institute, Toyon Bay, CA

DATES OF TRAVEL: 9:00 p.m. 04/15/14 - 2:00 a.m. 04/19/14

ACADEMIC BENEFITS TO STUDENTS: State Standards

**STRAND 4: LIFE SCIENCE**

**Concept 3: Populations of Organisms in Ecosystems**

**PO 1: Compare food chains in a specified ecosystem**

**PO 3: Analyze the interactions of living organisms with ecosystems - limiting factors and carrying capacity**

**STRAND 6: EARTH AND SPACE SCIENCE**

**Concept 2: Earth's Processes and Systems**

**PO 5: Relate plate boundary movements to their resulting land forms**

PROPOSED METHOD OF TRANSPORTATION:

☐ District-owned vehicles

Transportation approval: \_\_\_\_\_

☒ Other Gray Line Tours, 3594 E. Lincoln St., Tucson, AZ 85714

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

Parent Organization ☒

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

APPROX. COST

BUDGET CODE

Registration	<u>\$8,880.00</u>	<u>525-00-100-1001-165-6892</u> <u>526-00-100-1001-165-6892</u>
Transportation	<u>\$4,100.00</u>	<u>525-00-100-1001-165-6519</u> <u>526-00-100-1001-165-6519</u>
Meals	<u>Included</u>	_____
Lodging	<u>Included</u>	_____
Substitutes	<u>\$969.24</u>	<u>525-00-100-1001-165-6113</u> <u>526-00-100-1001-165-6113</u>
TOTAL	<u>\$13,949.24</u>	

WILL THE DISTRICT RECEIVE REIMBURSEMENT? No  
IF SO, SOURCE & AMOUNTS: \_\_\_\_\_

HOW ARE CHAPERONE EXPENSES PAID? Trip Funds

COST TO EACH STUDENT \$ \$400.00

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? Tax Credit and PTO

FUNDING SOURCE(S): Auxiliary, Tax Credit, PTO

FUNDRAISING ACTIVITIES PLANNED (If applicable):  
N/A

SUBMITTED BY: \_\_\_\_\_

Signature

Date

11/18/13

APPROVED BY: \_\_\_\_\_

Principal/Supervisor

Date

11/20/13

\_\_\_\_\_  
Associate Superintendent/Supervisor

Date

12/3/13

**AMPHITHEATER PUBLIC SCHOOLS  
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**ORIGINAL SUBMISSION**

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COUNTY OR A.I.A. SANCTIONED EVENT TRAVEL**

SCHOOL: **CDO**

ESTIMATED NUMBER OF STUDENTS: 30

NAME OF SCHOOL GROUP/CLUB/ENTITY: **Canyon Singers**

STAFF ADVISOR(S)/CHAPERONES: **Laonna Davis, Tanya Wile, Dave Wile, Jeff Davis, Terri Guenther, Lori Johnson, Susan Leader, Lisa Ortiz**

ABSENCE: # Days 4 Sub Required: ☒ Yes ☐ No # of School Days Missed 2

ACTIVITY / EVENT / PURPOSE OF TRAVEL: **To participate in a National Show Choir Competition**

DESTINATION OF TRAVEL: **Anaheim, Ca**

DATES OF TRAVEL: **April 25-28, 2014**

ACADEMIC BENEFITS TO STUDENTS: **Students perform for nationally acclaimed adjudicators, observe world class performances, and participate in a sound recording workshop.**

PROPOSED METHOD OF TRANSPORTATION:

☐ District-owned vehicles

Transportation approval: \_\_\_\_\_

☒ Other **Mountain View Charter Bus**

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

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

	APPROX. COST	BUDGET CODE
Registration	<b><u>7280.00</u></b>	<b><u>526/850-00-100-1001-282-6892</u></b>
Transportation	<b><u>3250.00</u></b>	<b><u>526/850-00-100-1001-282-6519</u></b>
Meals <u>pay for themselves</u>		_____
Lodging	<b><u>3000.00</u></b>	<b><u>526/850-00-100-1001-282-6892</u></b>
Substitutes	<b><u>150.00</u></b>	<b><u>526/850-00-100-1001-282-6113</u></b>

TOTAL

13680.00

WILL THE DISTRICT RECEIVE REIMBURSEMENT? \_\_\_\_\_

IF SO, SOURCE & AMOUNTS: \_\_\_\_\_

HOW ARE CHAPERONE EXPENSES PAID? Chaperones pay own expenses.

COST TO EACH STUDENT \$ 380

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? Scholarships and Fund Raising

FUNDING SOURCE(S): fund raising, tax-credit

FUNDRAISING ACTIVITIES PLANNED (If applicable):  
candy sales, donations from community concerts

SUBMITTED BY:

Laonna Davis  
Signature

11/12/13  
Date

APPROVED BY:

Paul Dush  
Principal/Supervisor

11/14/13  
Date

John Deen  
Associate Superintendent/Superintendent

11/13/13  
Date

**AMPHITHEATER PUBLIC SCHOOLS  
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*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: AHS

ESTIMATED NUMBER OF STUDENTS: 65

NAME OF SCHOOL GROUP/CLUB/ENTITY: AHS Band, Choir, Orchestra

STAFF ADVISOR(S)/CHAPERONES: Russ Granillo, Sonya Yount, Sheri Woolridge, Mary Jane McIntyre, Tamara Wagner, Dan Howdeshell, Dan Waters, Sarah Waters

ABSENCE: # Days 3 Sub Required: ☒ Yes ☐ No # of School Days Missed 1

ACTIVITY / EVENT / PURPOSE OF TRAVEL: Music trip to California. Students will perform at venues in California, participate in workshops, and see professional music performances.

DESTINATION OF TRAVEL: San Diego, CA Buena Park, CA 90621, (800) 627-7468

DATES OF TRAVEL: May 9 - 11, 2014

ACADEMIC BENEFITS TO STUDENTS: Students will receive critiques on musicianship and technique during a workshop with college level directors. Students will compete for awards given based on various areas of musicianship. They will get to experience performing in a large venue and they will also see a professional performance.

PROPOSED METHOD OF TRANSPORTATION:

☐ District-owned vehicles

Transportation approval: \_\_\_\_\_

☒ Other Southwest Road Trips 9251 N. Moonview Pl. Tucson, AZ 85742

Are expenses paid from any of the following accounts? Auxiliary \_\_\_\_\_ Tax Credits \_\_\_\_\_ Club Funds x  
Parent Organization x

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

	APPROX. COST	BUDGET CODE
Registration	<u>\$6875.00</u>	<u>526/850-00-100-1001-281-6892</u>
Transportation	<u>\$5500.00</u>	<u>526/850-00-100-1001-281-6519</u>
Meals	<u>\$2942.50</u>	<u>526/850-00-100-1001-281-6892</u>
Lodging	<u>\$5225.00</u>	<u>526/850-00-100-1001-281-6892</u>

Substitutes \$150.00

850 -00-100-1001-281-6113

TOTAL \$20,692.50

WILL THE DISTRICT RECEIVE REIMBURSEMENT? No  
IF SO, SOURCE & AMOUNTS: \_\_\_\_\_

HOW ARE CHAPERONE EXPENSES PAID? Chaperones pay their own expenses.

COST TO EACH STUDENT \$ 375.00

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? Fundraisers, partial scholarships for students in need

FUNDING SOURCE(S): Club Funds, Parent Organization,

FUNDRAISING ACTIVITIES PLANNED (If applicable):  
Haunted house, Rodeo concessions, Music festival

SUBMITTED BY: \_\_\_\_\_

Signature

11-5-13  
Date

APPROVED BY: \_\_\_\_\_

Principal/Supervisor

11/5/13  
Date

\_\_\_\_\_  
Associate Superintendent/Superintendent

12/3/13  
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): Cathy Clonts  
Patti Merrill  
Maritz Ellis

SCHOOL: District Offices  
Department (opt.): Food Service  
DATE(S): July 13-17, 2014

ACTIVITY/EVENT: Annual National Conference for (SNA) School Nutrition Association

LOCATION: Boston, MA

ABSENCE: # Days 5 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>\$915.00</u>	<u>510-00-100-3100-526-6360</u>
Transportation	<u>\$0.00</u> Mode <u>air</u>	<u>paid by vendor</u>
Rental Car	_____	_____
Meals	<u>\$531.00</u>	<u>510-00-100-3100-526-6582</u>
Lodging	<u>\$0.00</u>	<u>paid by vendor</u>
Substitutes	_____	_____
TOTAL	<u>\$1446.00</u>	

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

Purpose of travel: To attend ANC professional growth conference and learn new ways to be compliant with new federal rules and regulations for (NSLP) National School Lunch Program.

Outcomes and academic benefits to students and staff: To meet new standards and regulations for school breakfast and lunch.

Submitted by: \_\_\_\_\_

Signature

Date

11-26-13

Principal/Supervisor

Date

11-26-13

Associate Superintendent/Supintendent

Date

12/3/13

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

EMPLOYEE(S): Maria Figueroa  
Patricia Marquez  
Kathy Neumaier

SCHOOL: District Offices  
Department (opt.): Food Service  
DATE(S): July 13-17, 2014

ACTIVITY/EVENT: Annual National Conference for (SNA) School Nutrition Association

LOCATION: Boston, MA

ABSENCE: # Days 5 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>\$915.00</u>	<u>510-00-100-3100-526-6360</u>
Transportation	<u>\$0.00</u> Mode <u>air</u>	<u>paid by vendor</u>
Rental Car	_____	_____
Meals	<u>\$531.00</u>	<u>510-00-100-3100-526-6582</u>
Lodging	<u>\$0.00</u>	<u>paid by vendor</u>
Substitutes	_____	_____
TOTAL	<u>\$1446.00</u>	

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

Purpose of travel: To attend ANC professional growth conference and learn new ways to be compliant with new federal rules and regulations for (NSLP) National School Lunch Program

Outcomes and academic benefits to students and staff: To meet new standards and regulations for school breakfast and lunch.

Submitted by: \_\_\_\_\_

Signature

11-26-13  
Date

Principal/Supervisor

11-26-13  
Date

Associate Superintendent/Supintendent

12/3/13  
Date

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EMPLOYEE(S): Marc Lappitt  
Amy Richards  
Virginia Garcia

SCHOOL: District Offices  
Department (opt.): Food Service  
DATE(S): July 13-17, 2014

ACTIVITY/EVENT: Annual National Conference for (SNA) School Nutrition Association

LOCATION: Boston, MA

ABSENCE: # Days 5 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>\$1125.00</u>	<u>510-00-100-3100-526-6360</u>
Transportation	<u>\$0.00</u> Mode <u>air</u>	<u>paid by vendor</u>
Rental Car	_____	_____
Meals	<u>\$531.00</u>	<u>510-00-100-3100-526-6582</u>
Lodging	<u>\$0.00</u>	<u>paid by vendor</u>
Substitutes	_____	_____
TOTAL	<u>\$1674.00</u>	

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

Purpose of travel: To attend ANC professional growth conference and learn new ways to be compliant with new federal rules and regulations for (NSLP) National School Lunch Program.

Outcomes and academic benefits to students and staff: To meet new standards and regulations for school breakfast and lunch.

Submitted by:

Signature

Date

Principal/Supervisor

Date

Associate Superintendent/Supintendent

Date

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EMPLOYEE(S): Cathy Eiting Todd Jaeger

SCHOOL: District Offices

Linda Haller \_\_\_\_\_

Department (opt.): Student Services

DATE(S): May 3-7, 2014

ACTIVITY/EVENT: 35<sup>th</sup> Annual LRP Institute on Legal Issues of Educating Individuals with Disabilities

LOCATION: Orlando, FL

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>\$3725</u>	<u>001-00-200-2579-540-6360</u>
Transportation	<u>\$2031</u>	Mode <u>Air &amp; parking</u> <u>001-00-200-2210-540-6582</u>
Rental Car	<u>n/a</u> _____	
Meals	<u>\$792</u>	<u>001-00-200-2210-540-6582</u>
Lodging	<u>\$2900</u>	<u>001-00-200-2210-540-6582</u>
Substitutes	_____	_____
TOTAL	<u>\$9448</u>	

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

Purpose of travel: To obtain updates on legal issues and subsequent best practices in providing special education services

Outcomes and academic benefits to students and staff: Information obtained will be shared with staff throughout the year

Submitted by:

Signature

11/21/13

Date

Principal/Supervisor

Date

Associate Superintendent/Supintendent

Date