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):	<u>Mare</u>	<u>Lappitt</u>	SCHOOL: <u>District Offices</u>
	<u>Amy</u>	Richards	Department (opt.): Foodservice
			DATE(S): <u>7/15-7/18/12</u>
ACTIVITY/EVEN	T: <u>Annua</u>	al School Nutrition Conferenc	<u>e</u>
LOCATION: <u>D</u>	enver, C	<u>o</u>	
ABSENCE: #	[‡] Days <u>4</u>	Sub Required: Yes No	# of School Days Missed <u>0</u>
EXPENSES REQU	JESTED:	(OBTAIN RECEIPTS FOR A	LL INCURRED EXPENSES)
		APPROXIMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registratio	on <u>71</u>	0.00	<u>510 00 100 2579 526 6360</u>
Transport	ation <u>80</u>	00.00 Mode <u>Ai</u>	<u>510 00 100 2579 526 6582</u>
Rental Car	<u>60</u>	0.00	<u>510 00 100 2579 526 6582</u>
Meals	<u>35</u>	52.00	<u>510 00 100 2579 526 6582</u>
Lodging	<u>1,</u>	600.00	<u>510 00 100 2579 526 6582</u>
Substitutes	<u>0</u>		<u>N/A</u>
TOTAL	<u>3,</u>	110.00	
The District will] (or) wi	II not ⊠ receive reimburseme	nt from outside sources.
Purpose of travel:	Attend th	ne annual School Nutrition Co	nference
		efits to students and staff: Bet entation of USDA mandates.	ter nutritional choices for students and staff. Better
Submitted by: Sig	gnature	Jan 186	3/27/12 Date
Pri	incipal/Su	Lah Patruch Welse	3/27/12 Date 3-28-12-
Ās	sociate Si	uperintendent/Superintendent	Date

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): 1	<u>Laurie Sheber, Mich</u>	iael Capizzi, Yolanda H	errera, SCHOOL: AHS		
1	Matt Haverty, Lisa	Millerd, Ben Bultman	Department (opt.):		
<u>9</u>	Carla Broussard,		DATE(S): <u>7/29/12-8/1/12</u>		
ACTIVITY/EVENT:	Avid Summer Inst	tute			
LOCATION: <u>Phi</u>	ladelphia, PA				
ABSENCE: # D	Days 4 Sub Requi	red: Yes No	# of School Days Missed 0	i	
EXPENSES REQUE	STED: (OBTAIN R	ECEIPTS FOR ALL INC	CURRED EXPENSES)		
	<u>APPROX</u>	IMATE COST	BUDGET CODE/E (Note: Tax credit contribution require a budget code.)		
Registration	4,683.00		100.12.100.2210.281.6360		
Transportati	ion <u>3,605.00</u>	Mode <u>air</u>	100.12.100.2210.281.6582		
Rental Car	00.00		100.12.100.2210.281.6582		
Meals	<u>1,416.00</u>		100.12.100.2210.281.6582	100.12.100.2210.281.6582	
Lodging	<u>2,685.00</u>		100.12.100.2210.281.6582		
Substitutes	<u>NA</u>		<u>NA</u>		
TOTAL	<u>12,389.00</u>				
The District will	(or) will not ⊠ rec	eive reimbursement from	outside sources.		
the implementation	of the program at o	ur site. This will includ	nation) training for our AVID S e our District Director, Site Coo be put in place at Amphi High S	rdinator, AVID	
			chool and La Cima Middle Sch		
site team will explor targets our underse	e data to construct rved students (mino ols build communit	an action plan for effect rity and average achiev y support systems for sc	vill learn effective instructional pive implementation at our site. The ers), provides quality staff developed by the ers and success, and address how to	The AVID program opment for	
Submitted by: Signa	ui Shet		3/12/12 Date	\$ 4	
Princ	cipal/Supervisor	Mloon	3/12/12 Date 3-28-12		
	ciate Superintendent		Date		