# 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>Di</u>	ana Pitney SCF	HOOL: District Offices
<u></u>		Department (opt.): State and Federal Programs
	DA	TE(S): <u>4/10/11-4/15/11</u>
ACTIVITY/EVENT: <u>F</u>	arents as Teachers Foundational and Model	Training for educator certification.
LOCATION: St. Lo	ouis, MO	
ABSENCE: # Day	ys <b>6</b> Sub Required: □Yes ⊠No	# of School Days Missed 5
EXPENSES REQUES	TED: (OBTAIN RECEIPTS FOR ALL INCUI	RRED EXPENSES)
	APPROXIMATE COST	BUDGET CODE/DESCRIPTION  (Note: Tax credit contributions are District funds and require a budget code.)
Registration	<u>\$850</u>	472-00-100-2579-510-6360
Transportation	Mode Airplane	472-00-100-2290-510-6582
Rental Car	N/A	N/A
Meals	<u>\$650</u>	472-00-100-2290-510-6582
Lodging	\$600_	472-00-100-2290-510-6582
Substitutes	N/A	<u>N/A</u>
TOTAL	<u>\$2,550</u>	
The District will ⊠ (o	r) will not receive reimbursement from ou	tside sources.
Purpose of travel: <u>Paraprogram.</u>	ent Educator training for certification is man	ndatory for the Amphi Parents as Teachers
Outcomes and academi readiness, family litera	c benefits to students and staff: <u>Increase pare</u> acy.	ent involvement, early intervention, kinder-
Submitted by: Signatu	leana Pitney  TColi	3/17/11 Date 3/28/14
	al/Supervisor  The Superintendent/Superintendent	Date 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2

### 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

SCHO	OL: <u>CDO</u>						
ESTIMATED NUMBER OF STUDENTS: 24							
NAME OF SCHOOL GROUP/CLUB/ENTITY: CDO Jazz Big Band							
STAFF ADVISOR(S)/CHAPERONES: <u>Darrell Prochaska</u> , Russ Granillo, Dan Howedshell							
ABSE	NCE: # Days 1 Sul	b Required: X Yes	□ No ₹	of School Days Missed 1			
ACTIVITY / EVENT / PURPOSE OF TRAVEL: Attending Jazz Competition in San Antonio, Tx.							
DESTINATION OF TRAVEL: St. Mary College, San Antonio, Tx.							
DATES OF TRAVEL: 04/14 - 04/17/2011  ACADEMIC BENEFITS TO STUDENTS: To represent CDO and the Amphi District in an international setting for jazz competition. They will also be exposed to other groups of equal or greater ability, and this leads to better musicianship.  PROPOSED METHOD OF TRANSPORTATION:							
☐ District-owned vehicles  Transportation approval:  ☐ Other Sportsman Bus Ce., Inc.							
Are expenses paid from any of the following accounts? Auxiliary Tax Credits <u>Yes</u> Club Funds <u>Yes</u> Parent Organization <u>Yes</u>							
EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)							
		APPROX. COST	Γ	BUDGET CODE			
; ** **	Registration	<u>\$225.00</u>		850/526-00-100-3400-282-6892			
	Transportation	<u>\$6,200.00</u>		530-00-100-3400-282-6515			
	Meals	\$00.00		Self			
	Lodging	<u>\$464.03</u>		850/526-00-100-3400-282-6515			
	Substitutes	<u>\$75.00</u>		<u>850/526-00-100-3400-282-6113</u>			

WILL THE DISTRI IF SO, SOURCE &	CT RECEIVE REIMBURSEMENT? <u>No</u> AMOUNTS:	
HOW ARE CHAPE	RONE EXPENSES PAID? <u>Self</u>	
COST TO EACH ST	TUDENT \$ <b>\$00.00</b>	
	AVEL MADE AVAILABLE TO ALL ELIGIBLE STU x credits, Class Fees, Club Funds.	DENTS (LOW FAMILY INCOME
FUNDING SOURCE	E(S): <u>Tax credits, Class Fees, Club Funds.</u>	
FUNDRAISING AC	TIVITIES PLANNED (If applicable):	
,		
SUBMITTED BY:	Signature	<u>03/16/11</u> Date
APPROVED BY:	Tel Dal	<u>03/16/11</u>
	Principal/Supervisor  Patruck Welson	Date 4-4-11
	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: Prince							
ESTIMATED NUMBER	OF STUDENTS: 7						
NAME OF SCHOOL GR	OUP/CLUB/ENTITY:	Odyssey o	of the Mind Club				
STAFF ADVISOR(S)/CHAPERONES: <u>Leigh Kechely</u>							
ABSENCE: # Days <u>6</u> S	ub Required: Yes	⊠ No	# of School Days Missed <u>0</u>				
ACTIVITY / EVENT / PURPOSE OF TRAVEL: Odyssey of the Mind World Finals							
DESTINATION OF TRAVEL: University of Maryland							
DATES OF TRAVEL: M. ACADEMIC BENEFITS		<sup>st</sup> Century S	<u>skills</u>				
PROPOSED METHOD C District-owned vehicle Transportation approval: Other	es		<u>1</u>				
Are expenses paid from ar Parent Organization		ounts? Auxi	liary <u>x</u> Tax Credits <u>x</u> Club Funds <u>x</u>				
EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)							
	APPROX. COS	T	BUDGET CODE				
Registration	<u>2500</u>		<u>526-00-100-1001-111-6892</u>				
Transportation	<u>4600</u>		001-00-100-1001-111-6519				
Meals	<u>2500</u>		<u>526-00-100-1001-111-6892</u>				
Lodging	<u>3500</u>		<u>526-00-100-1001-111-6892</u>				
Substitutes	ō						
TOTAL	13,100						

WILL THE DISTRICT RECEIVE REIMBURSEMENT? **yes** IF SO, SOURCE & AMOUNTS: **tax credits** 

HOW ARE CHAPERONE EXPENSES PAID? fundraise funds

COST TO EACH STUDENT \$ 1200

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? tax credit donations, shared fundraising

FUNDING SOURCE(S): tax credit, donations, community fund raising events

FUNDRAISING ACTIVITIES PLANNED (If applicable):

car wash, yard sales, bake sale, donation invitation letters to local businesses and friends,

APPROVED BY:

APPROVED BY:

Principal/Supervisor

Associate Superintendent/Superintendent

Signature

3-28-11

Date

4-4-1/

Date