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 Jaeger		HOOL: <u>District Offices</u> Department (opt.): <u>Legal</u>
			ATE(S): <u>July 7-11, 2012</u>
	: <u>National School Pu</u> icago, Illinois	blic Relations Association	n Seminar
ABSENCE: # I	Days <u>4</u> Sub Requi	red: 🗌 Yes - 🖾 No	# of School Days Missed $\underline{0}$
EXPENSES REQUI	ESTED: (OBTAIN R	ECEIPTS FOR ALL INCU	IRRED EXPENSES)
	<u>APPROX</u>	IMATE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)
Registration	745.00		001001002579505 6360
Transportat	ion <u>650.00</u>	Mode <u>air/taxi</u>	001001002579505 6582
Rental Car	175.00		001001002579505 6582
Meals	<u>295.00</u>		001001002579505 6582
Lodging	1000.00		001001002579505 6582
Substitutes	MARAGAMAN		
TOTAL	2865.00		
The District will	(or) will not ⊠ rec	eive reimbursement from o	outside sources.
Purpose of travel: $\underline{\mathbf{T}}$	o attend the NSPRA	<u>Seminar</u>	
Outcomes and acade	mic benefits to studer	its and staff:	
Submitted by: Sign	ature ature	<u> </u>	
	cipal/Supervisor	h Nelson	Date 5-23-12-
Δεει	ociate Superintendant/	Nunarintandant	Data

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: IRHS			
ESTIMATED NUM	BER OF STUDENTS: 20		
NAME OF SCHOO	L GROUP/CLUB/ENTITY:	IRHS Wrestlin	g Club
STAFF ADVISOR(S)/CHAPERONES: <u>Tim Be</u>	rrier, Jeff Hanr	nan, Paul Vasquez
ABSENCE: # Days	6 Sub Required: ☐ Yes	⊠ No #	of School Days Missed 9
ACTIVITY / EVEN	T / PURPOSE OF TRAVEL:	: <u>AAU Grand N</u>	ationals
DESTINATION OF	TRAVEL: Santa Fe, NM		
			Il develop self confidence by competing
PROPOSED METH ☐ District-owned of Transportation appro ☐ Other Van Rent	oval:	N:	
Are expenses paid fi Parent Organization		ounts? Auxiliary	Tax Credits X Club Funds X
EXPENSE	ES REQUESTED: (OBTAI	IN RECEIPTS E	FOR ALL INCURRED EXPENSES)
	APPRÓX. COSº	T	BUDGET CODE
Registration			Minascialostosia
Transportat	ion <u>\$1,000.00</u>		526/850-00-100-3400-280-6519
Meals	<u>\$300.00</u>		526/850-00-100-3400-280-6892
Lodging	\$1,282.00		<u>526/850-00-100-3400-280-6892</u>
Substitutes			WT-0-7-1
TOTAL	\$2,582.00		

rev. 10/1/07

WILL THE DISTRI IF SO. SOURCE &	ICT RECEIVE REIMBURSEMENT? <u>no</u> AMOUNTS:	
HOW ARE CHAPE	ERONE EXPENSES PAID? self paid	
COST TO EACH S	TUDENT \$ 0	
HOW IS THIS TR. PROVISIONS)?	AVEL MADE AVAILABLE TO ALL ELIGIBLE S	TUDENTS (LOW FAMILY INCOME
FUNDING SOURC	EE(S): Tax credit and club funds	
FUNDRAISING AC	CTIVITIES PLANNED (If applicable):	
SUBMITTED BY:	Signature	4/9/12 Date
APPROVED BY:	Mhha By O Principal/Supervisor	
	Patrick rulson	5-16-12
	Associate Superintendent/Superintendent	Date

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

SCHOO	L: <u>IRHS</u>			
ESTIMATED NUMBER OF STUDENTS: 20				
NAME	OF SCHOOL G	ROUP/CLUB/ENTITY:	IRHS Wrest	ding Club
STAFF	ADVISOR(S)/C	HAPERONES: <u>Tim Be</u>	errier, Jeff Ha	annan, Paul Vasquez
ABSEN	CE: # Days 4	Sub Required: Yes	⊠ No	# of School Days Missed <u>0</u>
ACTIVI	TY/EVENT/	PURPOSE OF TRAVEL	: <u>Arbor View</u>	Summer Duals
DESTIN	NATION OF TR	AVEL: <u>Las Vegas, NV</u>	<u>!</u>	
ACADE	MIC BENEFIT	June 11-14, 2012 TS TO STUDENTS: _Th m across the U,S. in v		will develop self confidence by competing
Dist	SED METHOD rict-owned vehi rtation approval or Van Rental		N;	
	enses paid from Organization		ounts? Auxilia	ary Tax Credits X Club Funds X
	EXPENSES I	REQUESTED: (OBTA	IN RECEIPTS	S FOR ALL INCURRED EXPENSES)
		APPROX, COS	Τ	BUDGET CODE
	Registration	\$350.00		526/850-00-100-3400-280-6892
	Transportation	\$982.00		526/850-00-100-3400-280-6519
	Meals	<u>\$300.00</u>		526/850-00-100-3400-280-6892
	Lodging	\$1,000.00		526/850-00-100-3400-280-6892
	Substitutes			describe to the first security
	TOTAL	\$2,632.00		

rev. 10/1/07

WILL THE DISTRIC	CT RECEIVE REIMBURSEMENT? <u>no</u> AMOUNTS:	
HOW ARE CHAPEI	RONE EXPENSES PAID? self paid	
COST TO EACH ST	UDENT \$ 0	
HOW IS THIS TRA PROVISIONS)?	AVEL MADE AVAILABLE TO ALL ELIGIBLE ST	TUDENTS (LOW FAMILY INCOME
FUNDING SOURCE	E(S): Tax credit and club funds	
FUNDRAISING AC	TIVITIES PLANNED (If applicable):	
SUBMITTED BY:	A Ban	4/4/6
SODWITTED DT.	Signature	Date
APPROVED BY:	Principal/Supervisor	4/9/12 Date
_	Fatrick Welom	5-16-12
	Associate Superintendent/Superintendent	Date

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 NUMBE	ER OF STUDENTS: 14	<u> </u>		
NAME OF SCHOOL (GROUP/CLUB/ENTITY	′: Boys Baske	<u>tball</u>	
STAFF ADVISOR(S)/	CHAPERONES: Ben I	Hurley, Ryan N	Iontijo, Rene Campi	llo, Nate Benham
ABSENCE: # Days <u>3</u>	Sub Required: Yes	⊠ No	# of School Days Mis	sed <u>0</u>
ACTIVITY / EVENT Basketball Tournam		RAVEL: <u>Point</u>	Loma University	Tournament - Varsity
DESTINATION OF TI	RAVEL: Point Loma (Jniversity/ Sar	n Diego, CA.	
	<u>6/14/2012 - 6/17/2012</u> TS TO STUDENTS: <u>E</u>		:	
PROPOSED METHOE ☐ District-owned veh Transportation approva ☑ Other <u>Rental Vans</u>		ON:		
Are expenses paid from Parent Organization	any of the following ac	ecounts? Auxilia	ry Tax Credits _	Club Funds <u>X</u>
EXPENSES	REQUESTED: (OBT.	AIN RECEIPTS	S FOR ALL INCURR	ED EXPENSES)
	APPROX. CO	ST	BUDGET CO	DDE
Registration	325.00		850-00-620-3	400-281-6892
Transportation	<u>1200.00</u>		850-00-620-3	400-281-6519
Meals	600.00		850-00-620-3	400-281-6892
Lodging	<u>1700.00</u>		850-00-620-3	400-281-6892
Substitutes				
TOTAL	3825.00			

WILL THE DISTRIC IF SO, SOURCE & A	CT RECEIVE REIMBURSEMENT? <u>No</u> AMOUNTS:	
HOW ARE CHAPER	RONE EXPENSES PAID? Club account	
COST TO EACH ST	UDENT \$ <u>150.00</u>	
HOW IS THIS TRA PROVISIONS)? <u>Clu</u>	VEL MADE AVAILABLE TO ALL ELIGIBLE S' b account	TUDENTS (LOW FAMILY INCOME
FUNDING SOURCE	S(S): Summer Sponsors, FT fundraiser	
FUNDRAISING AC	TIVITIES PLANNED (If applicable):	
SUBMITTED BY: _	Bon Hurley Signature	<u>5/15/12</u> Date
	and HAAA	Bute
APPROVED BY: _	Principal/Supervisor	<u>5/15/12</u> Date
	Patrick nelson	5-22-12
	Associate Superintendent/Superintendent	Date

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: <u>AHS</u>				
ESTIMATED NUMBER OF STUDENTS: 4 (2 student registrations are paid for by scholarship through Jostens)				
NAME OF SCHOOL GROUP/CLUB/ENTITY: AHS				
STAFF ADVISOR(S)/CI	HAPERONES: <u>Gonzale</u>	z/Fields		
ABSENCE: # Days 3	Sub Required: \(\subseteq \text{Yes} \)	⊠ No	# of School Days Missed 0	
ACTIVITY / EVENT / P	URPOSE OF TRAVEL:	Josten's Year	rbook Camp	
DESTINATION OF TRA	VEL: <u>San Diego Unive</u>	rsity, CA		
	S TO STUDENTS: <u>Stappeds of Yearbool</u>	k duties an	have the opportunity to take workshops d plan for the Yearbook. This will help 's Yearbook.	
PROPOSED METHOD OF TRANSPORTATION: District-owned vehicles Transportation approval: Other Enterprise Van Rental				
Are expenses paid from any of the following accounts? Auxiliary <u>x</u> Tax Credits Club Funds <u>x</u> Parent Organization				
EXPENSES R	EQUESTED: (OBTAI	N RECEIPTS	FOR ALL INCURRED EXPENSES)	
	APPROX. COST	•	BUDGET CODE	
Registration	\$900 Students \$900 Advisor		525-00-100-3400-281-6892 400-13-270-2190-281-6892	
Transportation	\$505.00	0	<u>400-13-270-2190-281-6515</u> 	
Meals	\$200 student \$254 Advisor		850-00-100-3400-281-6892 400-13-270-2190-281-6892	
Lodging	Included in registration	<u>n</u> -		
Substitutes	Andrews	••-	***************************************	
TOTAL	\$2,759.00	0		

WILL THE DISTRICT RECEIVE REIMBURSEMENT? IF SO, SOURCE & AMOUNTS:	
HOW ARE CHAPERONE EXPENSES PAID? Chaperones are provided at t	he event.
COST TO EACH STUDENT \$ 0, club funds to cover other meals.	
HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUD PROVISIONS)? No cost to students.	ENTS (LOW FAMILY INCOME
FUNDING SOURCE(S): CTE, Yearbook Auxiliary, Yearbook Club	
FUNDRAISING ACTIVITIES PLANNED (If applicable):	
SUBMITTED BY:	5/22/12 5/22/12
Signature	Date
APPROVED BY: Principal/Supervisor	5/22/12
Tatrick nelson	5-22-12
Associate Superintendent/Superintendent	Date

rev. 10/1/07