

**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): Anna Puente

SCHOOL: District Offices
 Department (opt.): State and Federal Programs
 DATE(S): November 11-16, 2012

ACTIVITY/EVENT: Parents as Teachers Foundational and Model Training for educator certification.

LOCATION: St. Louis, MO

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

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>\$850</u>		<u>100-13-100-2190-510-6360</u>
Transportation	<u>\$500</u>	Mode <u>Airplane</u>	<u>100-13-100-2190-510-6582</u>
Rental Car	<u>N/A</u>		<u>N/A</u>
Meals	<u>\$260</u>		<u>100-13-100-2190-510-6582</u>
Lodging	<u>\$550</u>		<u>100-13-100-2190-510-6582</u>
Substitutes	<u>N/A</u>		<u>N/A</u>
TOTAL	<u>\$2,160</u>		

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

Purpose of travel: Parents as Teachers Foundational and Model Implementation Training for certification to implement curriculum within the district

Outcomes and academic benefits to students and staff: Increase parent involvement, early intervention, kindergarten readiness, family literacy.

Submitted by: Anna Puente 10.1.12
 Signature Date
J. Coe 10/2/12
 Principal/Supervisor Date
John Kelly 10/9/12
 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): Marcia Volpe Fabienna Godlewski SCHOOL: CDO
Ann Bonar Cris Cisco Department (opt.): IB
 _____ DATE(S): December 6-9, 2012

ACTIVITY/EVENT: International Baccalaureate Workshop (IB)

LOCATION: IB Americas Global Centre, 7501 Wisconsin Ave, #20814 Bethesda, Maryland

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

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>2800.00</u>	<u>140-13-100-2210-510-6360</u>
Transportation	<u>2900.00</u> Mode <u>Airline</u>	<u>140-13-100-2210-510-6582</u>
Rental Car	<u>300.00 (Ground Transportation)</u>	<u>140-13-100-2210-510-6582</u>
Meals	<u>944.00</u>	<u>140-13-100-2210-510-6582</u>
Lodging	<u>1800.00</u>	<u>140-13-100-2210-510-6582</u>
Substitutes	<u>150.00</u>	<u>140-13-100-2210-510-6113</u>
TOTAL	<u>\$8894.00</u>	

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

Purpose of travel: The workshop will provide our school and district with an understanding of the Common Core State Standards and IB. The workshop will examine how to align IB and CCSS in subject groups.

Outcomes and academic benefits to students and staff: Preparation for the effective implementation of CCSS and IB to impact instructional delivery.

Submitted by: Cris Cisco 9-20-12
 Signature Date
Marcia Volpe 9/24/12
 Principal/Supervisor Date
Man Kell 10/5/12
 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): Joseph Paddock

SCHOOL: District Offices
 Department (opt.): Interscholastics
 DATE(S): December 14 - 18, 2012

ACTIVITY/EVENT: NIAAA National Athletic Director's Conference

LOCATION: San Antonio, TX

ABSENCE: # Days 3 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>330.00</u>	<u>001.00.620.2210.512.6360</u>
Transportation	<u>650.00</u> Mode <u>Air</u>	<u>001.00.620.2325.512.6582</u>
Rental Car	<u>250.00</u>	<u>001.00.620.2325.512.6582</u>
Meals	<u>186.00</u>	<u>001.00.620.2325.512.6582</u>
Lodging	<u>575.00</u>	<u>001.00.620.2325.512.6582</u>
Substitutes	_____	_____
TOTAL	<u>1991.00</u>	

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

Purpose of travel: To attend NFHS/AIAAA National Athletic Directors Conference.

Outcomes and academic benefits to students and staff: Completion of coursework and workshops in safety, budget and other areas of athletics.

Submitted by: Joseph Paddock _____ 9/12/12
 Signature Date

 Principal/Supervisor Date
Jan Deen _____ 10/16/12
 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): Armando V. Soto

SCHOOL: AHS
 Department (opt.): _____
 DATE(S): December 15-18, 2012

ACTIVITY/EVENT: NIAAA National Athletic Director's Conference
 LOCATION: San Antonio, TX

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

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>245.00 + 85.00 class = 330.00 TOTAL</u>	<u>001.00.620.2210.512.6360 - Registration</u> <u>525.00.620.2210.281.6360 - Class</u>
Transportation	<u>800.00</u> Mode <u>Air/Shuttle</u>	<u>525.00.620.3400.281.6582</u>
Rental Car	_____	_____
Meals	<u>186.00</u>	<u>525.00.620.3400.281.6582</u>
Lodging	<u>575.00</u>	<u>525.00.620.3400.281.6582</u>
Substitutes	_____	_____
TOTAL	<u>1891.00</u>	

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

Purpose of travel: To attend NFHS/AIAAA National Athletic Director's Conference.

Outcomes and academic benefits to students and staff: Completion of coursework and workshops in safety, budget, and other areas of athletics.

Submitted by: [Signature] 9/25/12
 Signature Date
[Signature] 9-25-12
 Principal/Supervisor Date
[Signature] 10/16/12
 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): David Thatcher

SCHOOL: CDO
 Department (opt.): _____
 DATE(S): December 15-18, 2012

ACTIVITY/EVENT: NIAAA National Athletic Director's Conference

LOCATION: San Antonio, TX

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

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>245.00 + 85.00 class = 330.00 TOTAL</u>	<u>001.00.620.2210.512.6360 - Registration</u> <u>525.00.620.2210.282.6360 - Class</u>
Transportation	<u>800.00</u> Mode <u>Air/Shuttle</u>	<u>525.00.620.3400.282.6582</u>
Rental Car	_____	_____
Meals	<u>186.00</u>	<u>525.00.620.3400.282.6582</u>
Lodging	<u>575.00</u>	<u>525.00.620.3400.282.6582</u>
Substitutes	_____	_____
TOTAL	<u>1891.00</u>	

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

Purpose of travel: To attend NFHS/AIAAA National Athletic Director's Conference.

Outcomes and academic benefits to students and staff: Completion of coursework and workshops in safety, budget, and other areas of athletics.

Submitted by: [Signature] 9/25/12
 Signature Date
Marcia Valpe 9/25/12
 Principal/Supervisor Date
[Signature] 10/14/12
 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): Philip Tilicki

SCHOOL: IRHS
 Department (opt.): _____
 DATE(S): December 15-18, 2012

ACTIVITY/EVENT: NIAAA National Athletic Director's Conference

LOCATION: San Antonio, TX

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




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>245.00 + 255.00 classes = 500.00 TOTAL</u>	<u>001.00.620.2210.512.6360 - Registration</u> <u>525.00.620.2210.280.6360 - Classes (3)</u>
Transportation	<u>800.00</u> Mode <u>Air/Shuttle</u>	<u>525.00.620.3400.280.6582</u>
Rental Car	_____	_____
Meals	<u>186.00</u>	<u>525.00.620.3400.280.6582</u>
Lodging	<u>575.00</u>	<u>525.00.620.3400.280.6582</u>
Substitutes	_____	_____
TOTAL	<u>\$2,061.00</u>	

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

Purpose of travel: To attend NFHS/AIAAA National Athletic Director's Conference.

Outcomes and academic benefits to students and staff: Completion of coursework and workshops in safety, budget, and other areas of athletics.

Submitted by:  9/25/12
 Signature Date
 9/29/12
 Principal/Supervisor Date
 10/16/12
 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): Patrick Nelson _____
 - _____

SCHOOL: District Offices
 Department (opt.): Superintendent
 DATE(S): February 20-23, 2013

ACTIVITY/EVENT: American Association of School Administrators (AASA) National Conference on Education
 LOCATION: Los Angeles, CA

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

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>\$635.00</u>	<u>140.13.100.2210.501.6360</u>
Transportation	<u>\$350.00</u> Mode <u>air/taxi</u>	<u>140.13.100.2210.501.6582</u>
Rental Car	_____	_____
Meals	<u>\$236.00</u>	<u>140.13.100.2210.501.6582</u>
Lodging	<u>\$850.00</u>	<u>140.13.100.2210.501.6582</u>
Substitutes	_____	_____
TOTAL	<u>\$2,071.00</u>	

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

Purpose of travel: To attend the 2013 AASA Conference

Outcomes and academic benefits to students and staff: _____

Submitted by: Patrick Nelson 9/27/12
 Signature Date

 Principal/Supervisor Date
15 2013 John Bell
 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: Debbie Melde, David Torres, Amanda Kaiser, Iris Coleman, Robert Wolf

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

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

DESTINATION OF TRAVEL: Catalina Island, California

DATES OF TRAVEL: Mar. 5-8, 2013

ACADEMIC BENEFITS TO STUDENTS: Extension of science curriculum. Topics include marine biology, oceanography and ecology.

PROPOSED METHOD OF TRANSPORTATION:

District-owned vehicles

Transportation approval: _____

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>9600</u>	<u>525/526-00-100-1001-166-6892</u>
Transportation	<u>3300</u>	<u>525/526-00-100-1001-166-6515</u>
Meals	<u>300</u>	<u>525/526-00-100-1001-166-6892</u>
Lodging	<u>1200</u>	<u>525/526-00-100-1001-166-6892</u>
Substitutes	<u>1600</u>	<u>525/526-00-100-1001-166-6113</u>

TOTAL

16000

WILL THE DISTRICT RECEIVE REIMBURSEMENT? yes

IF SO, SOURCE & AMOUNTS: Student tuition and tax credit donations.

HOW ARE CHAPERONE EXPENSES PAID? Included in student cost.

COST TO EACH STUDENT \$ 400

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

FUNDING SOURCE(S): Tax credit donations

FUNDRAISING ACTIVITIES PLANNED (If applicable):

Snacks to be sold during after school sporting events.

SUBMITTED BY:


Signature

9/6/12
Date

APPROVED BY:


Principal/Supervisor

9/5/12
Date


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: Coronado K-8

ESTIMATED NUMBER OF STUDENTS: 45

NAME OF SCHOOL GROUP/CLUB/ENTITY: 8th grade /Science Department

STAFF ADVISOR(S)/CHAPERONES: Lauren Marlatt / Jeremy Hayes, Jill Warrick, Michael Warrick, Kay Lewis, Gerad Ball, Leigh Anne Wright

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

ACTIVITY / EVENT / PURPOSE OF TRAVEL: 8th grade trip to Catalina Island Marine Institute.

DESTINATION OF TRAVEL: Toyon Bay on Catalina Island, California

DATES OF TRAVEL: April 26-28, 2013

ACADEMIC BENEFITS TO STUDENTS: The students selected to attend will be participating in an academic experience that allows them to be introduced to oceanography and other related sciences.

PROPOSED METHOD OF TRANSPORTATION:

District-owned vehicles

Transportation approval: _____

Other Chartered bus-Bee Line

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

EXPENSES REQUESTED: (OBTAIN RECEIPTS FOR ALL INCURRED EXPENSES)

	APPROX. COST	BUDGET CODE
Registration	<u>\$11,583.00</u>	<u>525/526/850-00-100-1001-115-6892</u>
Transportation	<u>\$3,400.00</u>	<u>525/526/850-00-100-1001-115-6519</u>
Meals	<u>\$0.00</u>	<u>included in registration</u>
Lodging	<u>\$0.00</u>	<u>included in registration</u>
Substitutes	<u>\$540.00</u>	<u>525/526/850-00-100-1001-115-6113</u>

TOTAL \$15,523.00

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

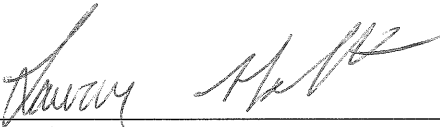
HOW ARE CHAPERONE EXPENSES PAID? They are paid with the student payment

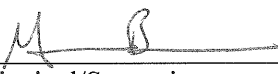
COST TO EACH STUDENT \$ 350.00

HOW IS THIS TRAVEL MADE AVAILABLE TO ALL ELIGIBLE STUDENTS (LOW FAMILY INCOME PROVISIONS)? Fundraising opportunities are being set up as well as work with the PTO for scholarships. We asked interested students to tell us how much they can afford and have a fundraising goal established so that all students who are eligible can attend.

FUNDING SOURCE(S): Parents/guardians will be responsible for the payments. Other funding sources will be tax credits, scholarships, and fundraising.

FUNDRAISING ACTIVITIES PLANNED (If applicable):
Snack bar at home games, PTO assistance.

SUBMITTED BY:  10/4/12
Signature Date

APPROVED BY:  10/4/12
Principal/Supervisor Date

 10/9/12
Associate Superintendent/Supervisor Date