

Browning Public Schools
Board Agenda Request
Meeting To Be Held: 2/10/26



Recognition: ☐ Students ☐ Staff ☐ Parents
Information: ☐ Building Report ☐ Old Business ☐ Superintendent's Report
Action: ☐ Resignation ☒ Hiring ☐ Contract Service Agreements
☐ Travel Out-of-State ☐ Travel In State ☐ Approvals
☐ Termination ☐ Legal Matters ☐ Other:
This action request pertains to ☐ Elementary (only) ☒ High School/District Wide

Date: 01/06/26

To: Rebecca Rappold
Superintendent of Schools

From: Sandi Campbell
Title: Principal

Subject: Out of State Travel: Close Up HS Civics Program 2025-2026

Description: Request approval for Kari McKay, Colin Sibbersen and 14 students to travel to Washington DC for Close Up Civics Program April 26 - May 1, 2026. Information is attached. We pay the total amount required and the cost includes airfare, hotel, meals. BHS Close up will cover cost of taxi, travel meals, museum/site seeing activities.

Chaperones: Kari McKay & Colin Sibbersen

Students: Ariel McFadyean, Christian Scout, Dani Coursey, David Burdeau, Eli Edwards, Harmony Lahr, Jaden SureChief, Jaeden Gilham, Keyenna DeRoche, Koen CalfRobe, Maya Andreas, Shaia Webber, Tiazhona YellowOwl and Timothy CreeMedicine.

Financial Impact: 5 students @ \$2,257.00 = \$11,285 (early bird deposit) student @ \$2437.00 = \$21,933, 2 adults @ \$3,087 = \$6,774.00 Total cost = \$40,242

Funding Source (Budget/grant, etc.): Close Up budget #218. students are fundraising for the cost to but due to the # of students participating we may not meet our goal. We would appreciate any funding the school board could assist with in the cost of the trip. To date we still owe close to \$15,000.

Attachment(s): Travel Request/Schedule, Student list, invoice/cost

Approval: Superintendent's Office/Finance/Personnel as applicable (Initial) _____

Comments: _____

Board Action: ☐ N/A (Info) ☐ Approved ☐ Denied ☐ Tabled to: _____

BROWNING PUBLIC SCHOOLS
Leave Report/Travel Request

Employee Name Sample
Building Browning High School

Employee # _____
Substitute Name _____

LEAVE REPORT

<u>Date of Leave</u> <u>4/27/2026-5/1/2026</u>	<u>Hours</u> <u>40 hrs</u>	<u>Type of Leave</u> <u>SR</u>
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Employee Signature _____ Date _____

☒ **Approved; Condition upon the specific leave being available for the specific employee** ☐ **Not Approved**

Principal/Supervisor _____ Date _____

TYPE OF LEAVE

AN Annual	PL Personal Leave	ALWO Approved Leave W/O Pay
SL Sick Leave	JD Jury Duty (attach verification)	ULWO Unapproved Leave w/o Pay
*EX/SR Extra-Curricular/School Related	NG National Guard	SWP Suspended w/Pay
	FN Funeral _____	SWOP Suspended w/o Pay

(Master Contract Relationship)

***If taking School Related/Extra-Curricular Leave only, In or Out of District, you MUST list Conference Agenda, Name, Location TRAVEL REQUEST (If receiving payment for EX/SR leave please fill out entire form completely)**

Conference/Workshop Close Up Civics Program (Attach Brochure/Agenda)

Location Washington, DC

Departure Date 4/25/26

Return Date 5/2/26

Departure Time TBA

Return Time TBA

Transportation: ☐ Personal Vehicle
☐ District Vehicle
☐ Professional Development

Mileage _____ = _____

Per Diem _____ = _____

☒ Registration PO# _____ = \$

☒ Hotel PO# _____ = \$

☒ Other PO# Airfare _____ = \$

Submit Receipts on return for Taxi/Shuttle/Parking/Luggage Sub Total \$

Budget N/A

Check Total \$

Employee Signature _____ Date _____

Principal/Supervisor _____ Date _____

Superintendent Signature _____ Date _____

White-Payroll

Yellow Acc.-Payable

Pink-Employee

Goldenrod-School Site

INVOICE



TO • Browning High School
FROM • Close Up Foundation
RE • Close Up Washington DC Program
DATE • 1/22/2026

School ID #: MT005-46385
Invoice #: MT005-260122
Program Start Date: 1/26/2026
Transportation Package: GTF

DESCRIPTION: Program cost for participants to attend the Close Up Civic Education Program in Washington, DC.

<u>Qty</u>	<u>Description</u>	<u>Unit Cost</u>	<u>Total Amt.</u>
5	Student Program Cost	\$ 2,257.00	\$ 11,285.00
9	Student Program Cost	\$ 2,437.00	\$ 21,933.00
2	Adult Program Cost	\$ 2,787.00	\$ 5,574.00
2	Single Room	\$ 600.00	\$ 1,200.00
1	Cancellation Fee	\$ 250.00	\$ 250.00
Balance Due:			\$ 40,242.00
10%	(Less Teacher Fellowship)*	\$ (2,787.00)	\$ (3,901.80)
	(Less Student Fellowship)		\$ (1,000.00)
	(Less Payment Received)		\$ (1,575.00)
	(Less Expected Payment)		\$ (6,250.00)
	(Less School Credit)		\$ (25.00)
TOTAL BALANCE DUE 1/29/2026:			\$ 27,490.20

***10% credit for every 1 paying participant (base adult tuition + transportation only).**

For Fast Service: Purchase orders should be faxed to 703-997-6573. Please call in School/District Credit Card and eCheck payments to 703-706-3416. **Credit card payments are limited to transactions of \$5,000 or less. For amounts exceeding this limit, please consider paying by mail.**

Please make checks payable to **Close Up Foundation**, write the **Invoice #** in the memo portion of the check, **include a copy of the invoice**, and mail payment to the following address:

Attn: Finance Department
Close Up Foundation
671 N Glebe Road, Suite 900
Arlington, VA 22203

671 N. Glebe Road, Suite 900, Arlington, VA 22203

Close Up 2026

Chaperones: Kari McKay
Colin Sibbernsen

Students: Ariel McFadyean
Christian Scout
Dani Coursey
David Burdeau
Eli Edwards
Harmony Lahr
JadenSureChief
Jaeden Gilham
Keyenna DeRoche
Koen CalfRobe
Maya Andreas
Shaia Webber
Tiazhona Yellow Owl
TimothyCreeMedicine