OUT-RADIUS STAFF TRAVEL REQUEST FORM								
MINIDOKA COUNTY JOINT SCHOOL DISTRICT # 331						#1	Feb	
ATE SUBMITTED:	1/19/16	NAME OF STAFF TRAVELING:			Morgan Coats			
(SUBM	IIT TYPED FORMS ONLY' DO NOT PRINT		NOTE: OUT OF RADIUS IS		IILES AND MUST BE AP	PROVED BY THE BOAR	D; A SEPARATE	
LIST TRIP(S) THAT ARE REQUIRED BY GRANT, OR GOVERNMENTAL RULES AND REGULATIONS, OR CONSIDERED IMPE			FORM MUST BE FILLED OUT FOR EACH TYPE.  PERATIVE TO THE OPERATIONS OF THE DISTRICT. ALL REQUESTS ARE SUBJECT TO APPROVAL. THE DEADLINE FOR ADJUST TRIP REQUESTS ARE REVIEWED AT THE SEPTEMBER BOARD MEETING).					
DATE(S) OF TRAVEL	NAME OF CONFERENCE, WORKSHOP, OR ACTIVITY	LOCATION OF CONFERENCE, WORKSHOP, OR ACTIVITY CITY & STATE	ITEMIZED EXPENSES (INCLUDE AIRFARE, MEALS, MILEAGE, REGISTRATION, LODGING, SHUTTLE, CAR RENTAL, ETG.) & TOTAL	TOTAL COST OF EXPENSES	AMOUNT EMPLOYEE WILL PAY	AMOUNT REQUESTED FOR DISTRICT TO PAY	SPECIFIC FUNDING SOURCE	
26-Fев	NEA LEADERSHIP SUMMIT	DALLAS, TEXAS	MEALS MILEAGE LODGING REGISTRATION AIREAGE OTHER	\$ -	\$ -	\$ -		
			MEALS MILEAGE LODGING REGISTRATION AIREARE OTHER MEALS	\$ -	\$	\$ -		
			MILEAGE LODGING REGISTRATION AIRFARE OTHER MEALS	\$ -	\$	\$ -		
			MILEAGE LODGING REGISTRATION AIRFARE OTHER	\$ -	\$ -	\$ -		
VHY TRAVEL IS REQUIRED (	OR RECOMMENDED? to be an Idaho representative to the NE	A leadership summit.		TOTAL:	TOTAL:	TOTAL:		
	,			\$ -	\$ -	\$ -		
VHAT IS YOUR PURPOSE FOR ATTENDING WORKSHOPS, CONFERENCES OR ACTIVITIES?  This summit provides an opportunity to collaborate with educators across the nation and learn tools/techniques to bring back and use in the classroom.								
How will the information gained from this travel be shared with staff and the board?  If our MCEA board report I can provide a written summary of what I learned and/or how it might be used in my building.								
How will the effectiveness of the training be assessed (Observations, Assessments, etc.)? will be collaborating with other leaders from Idaho to provide leadership trainings throughout the state.								
A TRAVEL REIMBURSEMENT FORM MUST ALSO BE FILLED OUT TO REQUEST PERDIEM  REQUESTS WILL BE RETURNED FOR ADDITIONAL INFORMATION.  INCOMPLETE TRAVEL								
dure of Supervisor/ADMINISTRATOR:								
IGNATURE OF SUPERINTENDEN	1/1/0.1/	°0-16				BOARD APPROVAL DATE:		

## OUT-RADIUS STAFF TRAVEL REQUEST FORM

MINIDOKA COUNTY JOINT SCHOOL DISTRICT # 331

#2

Feb

	MINIDOKA COUNTY JOINT SCHOOL DISTRICT # 331								
DATE SUBMITTED:	1/20/2016	NAME OF STAFF TRAVELING:	Candace Hurst, Carly Grant, Shanna Lindsay						
			NOTE: OUT OF RADIUS IS TRAVEL OVER 300 MILES AND MUST BE APPROVED BY THE BOARD; A SEPARATE FORM MUST BE FILLED OUT FOR EACH TYPE.						
LIST TRIP(S) THAT ARE REQUIRED BY GRANT, OR GOVERNMENTAL RULES AND REGULATIONS, OR C									
DATE(S) OF TRAVEL	NAME OF CONFERENCE, WORKSHOP, OR ACTIVITY	LOCATION OF CONFERENCE, WORKSHOP, OR ACTIVITY CITY & STATE	ITEMIZED EXPENSES (INCLUDE AIRFARE, MEALS, MILEAGE, REGISTRATION, LODGING, SHUTTLE, CAR RENTAL, ETC.)	TOTAL COST OF EXPENSES	AMOUNT EMPLOYEE WILL PAY	AMOUNT REQUESTED FOR DISTRICT TO PAY	SPECIFIC FUNDING SOURCE		
29-APR	IDAHO LEADS NETWORK MEETING	COUER D'ALENE, ID	MEALS \$ 195  MILEAGE \$ 149  LODGING \$ 580  REGISTRATION \$ -  AIREARE \$ 600.  OTHER \$ :	\$ 1,523.50	\$ -	\$ 1,523.50	SIG GRANT		
			MEALS MILEAGE LODGING REGISTRATION AIRFARE OTHER	\$ -	\$ -	\$ -			
4	1.5	g d c	MEALS MILEAGE LODGING REGISTRATION AIRFARE OTHER	\$ -	\$ -	\$ -			
			MEALS MILEAGE LODGING REGISTRATION AIRFARE OTHER	\$ -	\$ -	\$ -			
WHY TRAVEL IS REQUIRE	D OR RECOMMENDED?			TOTAL:	TOTAL:	TOTAL:			
				\$ 1,523.50	\$ -	\$ 1,523.50			
What is your purpose for attending workshops, conferences or activities?									
To gain valuable knowledge on literacy standards.									
HOW WILL THE INFORMATION GAINED FROM THIS TRAVEL BE SHARED WITH STAFF AND THE BOARD?									
Team meetings & collaboration.									
HOW WILL THE EFFECTIV	ENESS OF THE TRAINING BE AS	SESSED (OBSERVATIONS, ASSESS	MENTS, ETC.)?						
A Travel Reimbursement Form must also be filled out to request Perdiem incomplete travel requests will be returned for additional information.									
SIGNATURE OF SUPERVISOR/ADMINISTRATOR:									
SIGNATURE OF SUPERINTENDENT:						BOARD APPROVAL DATE:	late: 10/12/2014		

## STUDENT TRAVEL REQUEST FORM

#3 Feb

		ADVANCE BOARD AF	PPROVAL REQUEST*				
		MINIDOKA COUNTY JOINT	SCHOOL DISTRICT	# 331			
DATE SUBMITTED:	2/2/2016	NAME OF GROUP TRAVELING:	TENNIS TEAM				
ADVISOR NAME:	KAREN I	* NOTE: ADVANCE BOARD APPROVAL IS NECCESARY FOR 1) ALL STUDENT OVERNIGHT TRIPS 2) ALL STUDENT NON-EDUCATIONAL TRIPS IN RADIUS 3) ALL STUDENT TRIPS OUT OF RADIUS. PLEASE USE THE APPROPRIATE REQUEST FORM.					
		ES AND REGULATIONS, OR CONSIDERE			STRICT ALL REQUES	TC ADE CUBIECT TO	ADDDOVAL THE
		ST MONDAY OF EACH MONTH (ALL OUT					AFFROVAL. THE
Date(s) of Travel	DESCRIPTION OF ACTIVITY	LOCATION OF ACTIVITY CITY & STATE	ITEMIZED EXPENSES (INCLUDE AIRFARE, MEALS, MILEAGE, REGISTRATION, LODGING, SHUTTLE, CAR RENTAL, ETC.) & TOTAL	TOTAL COST OF EXPENSES	AMOUNT STUDENT WILL PAY	AMOUNT REQUESTED FOR DISTRICT TO PAY	SPECIFIC FUNDING SOURCE
APRIL15-16, 2016	East Idaho Invitational	IDAHO FALLS, ID	MEALS   TRANSPORTATION   \$ 700   LODGING   \$ 600   REGISTRATION   \$ 100   AIREABE   OTHER	\$ 1,400.00	\$ -	\$ 1,400.00	TENNIS TEAM, ATHELETICS
May 19-21, 2016	STATE TENNIS	Boise, ID	MEALS \$ 150 TRANSPORTATION \$ 1.75 LODGING \$ 200 REGISTRATION AIRFARE OTHER	\$ 525.00	\$ -	\$ 525.00	TENNIS TEAM, ATHELETICS
94			MEALS TRANSPORTATION LODGING REGISTRATION AIRFARE OTHER	\$ -	\$ -	\$ -	
			MEALS TRANSPORTATION LODGING REGISTRATION AIRFARE OTHER	\$ -	\$ -	\$ -	
WHY TRAVEL IS REQUIRED O				TOTAL:	TOTAL:	TOTAL:	
Γο participate in tennis matches.				\$ 1,925.00	\$ -	\$ 1,925.00	
WHAT IS YOUR PURPOSE FOR	R ATTENDING ABOVE ACTIVITIES?			RECE	VED		
To participate and increase s	skills. To send those that qualify	for State.		FEB - 3			
HOW WILL THE INFORMATION  WRITTEN REPORT TO SON	PERINTENDENT	SHARED WITH STAFF AND THE BO	ard? (Check One)	Accounts F District Ser	Payable vice Ctr.		
GOOD NEWS REPORT TO BOARD				PROPOSED DATE		1-May-16	
	MPLETE TRAVEL PROPOSAL MUST	BE SUBMITTED					
TRAVEL PROPOSAL ATTAC							
TRAVEL PROPOSAL SUBMITTED PRIOR TO TRAVEL				PROPOSED DATE 1-JUN-16			
A TRAVEL REIMBURSEMENT	FORM MUST ALSO BE FILLED OUT	TO REQUEST PERDIEM. INCOMPL	ETE TRAVEL REQUEST	S WILL BE RETURN	NED FOR ADDITION	NAL INFORMATION	. J. J. J.
Leliginot	TURE ACKNOWLEDGES COMPLIANCE WITH POL	ICY 702.47)		SIGNATURE OF PRI	OCIPAL:		
SIGNATURE OF SUPERINTENDEN	7-8-16			BOARD APPROVAL DATE	2-8	3=16	