

Browning Public Schools
Board Agenda Request
Meeting to Be Held: 08/29/2018



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: 08/20/2018

To: **Corrina Guardipee-Hall**
 Superintendent

From: Kimberly Tatsey-McKay
 Title: Good Medicine Program Director

Subject: **Out of State Travel- Annual Conference on Advancing School Mental Health**

Description: Kimberly Tatsey-McKay, Good Medicine Program Director, is recommending Out of State Travel for Daniella Rinehart, Tessa Racine, Jennifer Ehlers, Karla Bird, and Kimberly Tatsey-McKay to attend the Annual Conference on Advancing School Mental Health training on October 11-13, 2018, in Las Vegas, Nevada.

Financial Impact: \$2,464.21 ea (\$12,321.05)

Funding Source (Budget/grant, etc.): 115.90.465.1000.582.206

Attachment(s): Travel Request/Conference Agenda

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

Comments: _____

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

The 2018 Annual Conference on
Advancing School Mental Health

October 11-13, 2018 • Red Rock Casino, Resort, and Spa • Las Vegas, NV

CONFERENCE AGENDA

THURSDAY, OCTOBER 11, 2018

7:00 am	Registration	Red Rock Foyer
8:00-9:00 am	Keynote Presentation	Red Rock ABCDEF
<i>9:00-9:15 am</i>	<i>Break</i>	
9:15-10:15 am	Conference Session 1	Breakout rooms
<i>10:15-10:30 am</i>	<i>Break</i>	
10:30-11:30 am	Conference Session 2	Breakout rooms
11:30-11:45 am	Box Lunch Pickup	Red Rock Foyer + additional seating
11:45 am - 12:45 pm	Current Topical Sessions	Breakout rooms
<i>12:45-1:00 pm</i>	<i>Break</i>	
1:00-2:00 pm	Conference Session 3	Breakout rooms
<i>2:00-2:15 pm</i>	<i>Break</i>	
2:15-3:15 pm	Conference Session 4	Breakout rooms
<i>3:15-3:30 pm</i>	<i>Break</i>	
3:30-4:30 pm	Conference Session 5	Breakout rooms
<i>4:30-4:45 pm</i>	<i>Break</i>	
4:45-5:45 pm	Conference Session 6	Breakout rooms
<i>Other Activities</i>		
7:00 am - 5:00 pm	Exhibit Displays	Charleston Foyer
10:00 am - 1:00 pm	Research Summit [^]	Veranda
6:00-7:00 pm	CSMH Advisory Board Meeting [^]	Strip View A

[^] invitation only



The 2018 Annual Conference on
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CONFERENCE AGENDA

FRIDAY, OCTOBER 12, 2018

7:00 am	Registration	Red Rock Foyer
8:00-9:00 am	Keynote Presentation	Red Rock ABCDEF
9:00-10:00 am	Plenary Panel	Red Rock ABCDEF
<i>10:00-10:15 am</i>	<i>Break</i>	
10:15-11:15 am	Conference Session 7	Breakout rooms
<i>11:15-11:30 am</i>	<i>Break</i>	
11:30 am - 12:30 pm	Conference Session 8	Breakout rooms
12:30-1:15 pm	Seated Lunch and Awards Ceremony	Red Rock Foyer ABCDEF
<i>1:15-1:30 pm</i>	<i>Break</i>	
1:30-2:45 pm	Advanced Practice Skills Workshop	Breakout rooms
<i>2:45-3:00 pm</i>	<i>Break</i>	
3:00-4:00 pm	Conference Session 9	Breakout rooms
<i>4:00-4:15 pm</i>	<i>Break</i>	
4:15-5:45 pm	Symposia	Breakout rooms
5:45-7:15 pm	Poster Presentations and Networking Reception	Pavillion Ballroom

Other Activities

7:00 am - 5:00 pm	Exhibit Displays	Charleston Foyer
4:00-5:30 pm	Poster Board Set Up	Pavillion Ballroom

SATURDAY, OCTOBER 13, 2018

8:00-8:30 am	Breakfast and Registration	Red Rock Foyer
	<i>Please complete all evaluations and the CEU packet (if applicable).</i>	
8:30-11:45 am	Intensive Training Workshops	Breakout rooms



**BROWNING PUBLIC SCHOOLS
Leave Report/Travel Request**

Employee Name SAMPLE
Building _____

Employee # _____
Substitute Name NA

LEAVE REPORT

<u>Date of Leave</u>	<u>Hours</u>	<u>Type of Leave</u>
<u>10/10 - 14, 2018</u>	<u>40</u>	<u>SR</u>
_____	_____	_____

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 Name/Location**

TRAVEL REQUEST (If receiving payment for EX/SR leave please fill out entire form completely)

Conference/Workshop Annual Conference on Advancing School Mental Health **(Attach Brochure/Agenda)**

Location Las Vegas, Nevada

Departure Date 10/10/18

Return Date 10/14/18

Departure Time 7:00 a.m.

Return Time 08:30 p.m.

Transportation: Personal Vehicle
 District Vehicle
 Professional Development

Mileage 127 x .545 = \$ 69.21
Per Diem 90 x 5 = \$ 450.00

Registration PO# _____ = \$ 545.00
 Hotel PO# _____ = \$ 926.00
 Other PO# _____ = \$ 474.00
 Other PO# _____ = \$ 0.00

Sub Total \$2,464.21

Budget 115.90.465.1000.582.206 (100 %)

Check Total \$ 519.21

Employee Signature _____ Date _____

Principal/Supervisor _____ Date _____

Superintendent Signature _____ Date _____