

Browning Public Schools
Board Agenda Request
Meeting to Be Held: 9/29/16



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: 1/4/16

To: **John Rouse**
 Superintendent

From: Billie Jo Juneau
 Title: NAS Director

Subject: Blackfeet Language Symposium V

Description: Request approval to travel for Art Westwolf, Stan Whiteman, Amanda Whiteman, Everett Armstrong, Pat Armstrong and Carolynn Zubach to attend the Blackfoot Language Symposium in Lethbridge Alberta Canada October 4 – October 7, 2016.

Financial Impact: \$625.40 each

Funding Source (Budget/grant, etc.): 115.90.413.2213.582.518

Attachment(s): Agenda/Travel Request

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

Comments: _____

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



AAHKSTAMAI'TSI'POYO'P

LET'S SPEAK BLACKFOOT

Niitsi'powahsini Aokakiopaato'p
BLACKFOOT LANGUAGE SYMPOSIUM V

October 5, 6 & 7, 2016

At

The Coast Lethbridge Hotel

526 Mayor Magrath Drive South
Lethbridge, AB
(403) 327-5701

Breakfast & Lunch Will Be Provided Daily

Sessions Include:

- . Blackfoot Place Names
- . Blackfoot Adverbs
- . Arts & Crafts
- . Siksikai'powahsin
- . A Visit With Our People
- . Blackfoot into English Curriculum
- . Traditional Dancing
- . Piikaniipowahsin
- . Sessions from Amskapipikani
- . Siksika

Registration Fee

- *General Public: \$50.00
- *Make Cheque payable to:
Aitsi'poyiiksi Committee
- *Seniors (65+): No Charge

First 250 Registered will be accepted!
Hotel Rooms At Your Own Expense

Door Prizes

Hosted by:

Aitsi'poyiiksi Committee

For more information:

Ph: (403) 737-8660
Fax: (403) 737-8783
Attn: Deborah Wells

Note: **Sessions/Participants may be recorded**

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

Employee Name _____
Building _____

Employee # _____
Substitute Name NA

LEAVE REPORT

<u>Date of Leave</u>	<u>Hours</u>	<u>Type of Leave</u>
<u>10/4/2016 - 10/7/2016</u>	<u>16</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 Blackfoot Language Symposium V **(Attach Brochure/Agenda)**

Location Lethbridge Alberta Canada

Departure Date 10/4/2016 Return Date 10/7/2016

Departure Time 4:00 pm Return Time 8:00 pm

Transportation: Personal Vehicle
 District Vehicle
 Professional Development

Mileage 220 @ .54 ÷ 2 = \$ 59.40
Per Diem 2 @ \$90 +D 42+ B 24+L24 = \$ 270.00

Registration PO# _____ = \$ 50.00
 Hotel PO# _____ = \$ 246.0
 Other PO# _____ = \$ 0.00
 Other PO# _____ = \$ 0.00

Sub Total \$ 625.40

Budget 115.90.413.2213.582.518 (100 %) \$329.40
_____ (_____ %)

Check Total 329.40

Employee Signature _____ Date _____

Principal/Supervisor _____ Date _____

Superintendent Signature _____ Date _____

