



UNITED INDEPENDENT SCHOOL DISTRICT AGENDA ACTION ITEM

TOPIC Approval of Requests from Board Members in re: Use of Board of Trustees Discretionary

Funds for Various Projects/Campuses

SUBMITTED BY: Javier Montemayor **OF:** Board President

APPROVED FOR TRANSMITTAL TO SCHOOL BOARD: March 25, 2015

RECOMMENDATION:

It is recommended that the United ISD Board of Trustees approve Requests from Board Members in re: Use of Board of Trustees Discretionary Funds for Various Projects/Campuses.

RATIONALE:

BUDGETARY INFORMATION:

BOARD POLICY REFERENCE AND COMPLIANCE:



Exhibit A

**United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2014-2015**

Requesting Campus UNITED HIGH SCHOOL

Campus Principal: Alberto Aleman

Board Member: Juan Roberto Ramirez

Board Member: _____

Description of Request: UHS Auto Tech

Supplies needed for Auto Tech Competitions

Estimated Cost of Request \$1000.00

Principal or Director Signature: [Signature] Date 3/4/2015

Associate Superintendent Approval: Yes No

Associate Superintendent Signature: _____ Date _____

Superintendent Approval: Yes No

Superintendent Signature: _____ Date _____

Board Member Approval: Yes No

Board Member Signature: _____ Date _____

Board Member Approval: Yes No

Board Member Signature: _____ Date _____

Board Approval: Yes No Date Approved: _____

Please return the completed form to the Superintendent's Office for final processing.



Exhibit A

**United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2014-2015**

Requesting Campus: United High School Band

Campus Principal: Albert Aleman

Board Member: Judd Gulpin

Board Member: Javier Montemayor, Jr.

Board Member: _____

Description of Request: for Band Booster for expenses for Band students

Estimated Cost of Request \$3,500

Principal or Director Signature: _____ Date _____

Associate Superintendent Approval: Yes _____ No _____

Associate Superintendent Signature: _____ Date _____

Superintendent Approval: Yes _____ No _____

Superintendent Signature: _____ Date _____

Board Member Approval: Yes _____ No _____

Board Member Signature: _____ Date _____

Board Member Approval: Yes _____ No _____

Board Member Signature: _____ Date _____

Board Member Approval: Yes _____ No _____

Board Member Signature: _____ Date _____

Board Approval: Yes _____ No _____ Date Approved: _____

Please return the completed form to the Superintendent's Office for final processing.



Exhibit A

**United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2014-2015**

Requesting Campus: **MULLER**

Campus Principal: **Mayra N. Ramirez**

Board Member: **Juan Roberto Ramirez**

Board Member: _____

Board Member: _____

Description of Request: **Laminating Machine to be used for flashcards, metacognitive cards, vocabulary bingo and so much more. Faculty, Staff and students benefit from this machine (Our machine has destroyed many bought and teacher made items due to it not working).**

Estimated Cost of Request: **\$ 935.30**

Principal or Director Signature: *Mayra N. Ramirez* Date *3/16/15*

Associate Superintendent Approval: Yes No

Associate Superintendent Signature: _____ Date _____

Superintendent Approval: Yes No

Superintendent Signature: _____ Date _____

Board Member Approval: Yes No

Board Member Signature: _____ Date _____

Board Member Approval: Yes No

Board Member Signature: *Juan R. Ramirez* Date *3/17/15*

Board Member Approval: Yes No *by Clampon*

Board Member Signature: _____ Date _____

Board Approval: Yes No Date Approved: _____

Please return the completed form to the Superintendent's Office for final processing.



Exhibit A

United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2014-2015

Requesting Campus: MULLER

Campus Principal: Mayra N. Ramirez

Board Member: Juan Roberto Ramirez

Board Member: _____

Board Member: _____

Description of Request: Homework planners for students to keep them organized and have communication/documentation with parents thru the planners since student and parent sign the planner on a daily basis.

Estimated Cost of Request \$3,055.00

Principal or Director Signature: [Signature] Date 3/16/15

Associate Superintendent Approval: Yes ___ No ___

Associate Superintendent Signature: _____ Date _____

Superintendent Approval: Yes ___ No ___

Superintendent Signature: _____ Date _____

Board Member Approval: Yes ___ No ___

Board Member Signature: _____ Date _____

Board Member Approval: Yes [checked] No ___

Board Member Signature: [Signature] Date 3/17/15

Board Member Approval: Yes ___ No ___

Board Member Signature: _____ Date _____

Board Approval: Yes ___ No ___ Date Approved: _____

Please return the completed form to the Superintendent's Office for final processing.



Exhibit A

United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2014-2015

Requesting Campus: Student Relations/Discipline Management

Campus Principal: Annette Perez

Board Member: Javier Montemayor

Board Member:

Description of Request: Donation to Purchase Prizes for Annual Anti-Gang, Anti-Bullying Poster, Multimedia Contest & Writing Olympics Winners

Estimated Cost of Request: Total \$ 1,000.00

Principal or Director Signature: Date

Associate Superintendent Approval: Yes No

Associate Superintendent Signature: Date

Superintendent Approval: Yes No

Superintendent Signature: Date

Board Member Approval: Yes No

Board Member Signature: Date

Board Member Approval: Yes No

Board Member Signature: Date

Please return the completed form to the Superintendent's Office for final processing.



Exhibit A

United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2014-2015

Requesting Campus: United South High School

Campus Principal: Adrianna Ramirez

Board Member: Aliza Flores Oliveros - \$500

Board Member: Javier Montemayor - \$500

Board Member: Rick Rodriguez - \$500

Description of Request: Field Trip for the USHS Softball Program

Estimated Cost of Request \$1,500

Principal or Director Signature: Date

Associate Superintendent Approval: Yes No

Associate Superintendent Signature: Date

Superintendent Approval: Yes No

Superintendent Signature: Date

Board Member Approval: Yes No

Board Member Signature: Date

Board Member Approval: Yes No

Board Member Signature: Date

Board Member Approval: Yes No

Board Member Signature: Date

Board Approval: Yes No Date Approved:

Please return the completed form to the Superintendent's Office for final processing.