



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: Ricardo "Rick" Rodriguez **OF:** Board President

APPROVED FOR TRANSMITTAL TO SCHOOL BOARD: March 23, 2016

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:

Budget Amendment as needed.

BOARD POLICY REFERENCE AND COMPLIANCE:



Exhibit A

United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2015-2016

Requesting Campus: UISD ATHLETICS DEPT.

Campus Principal: BOBBY CRUZ, DIRECTOR

Board Member: ALL UISD BOARD MEMBERS

Board Member: _____

Description of Request: IPADS FOR UISD ATHLETIC TRAINERS TO USE W/ NEW ONLINE SOFTWARE

Estimated Cost of Request \$ 7826.⁷⁸ (1,118.¹¹ FROM EACH BOARD MEMBER

Principal or Director Signature: [Signature] Date 2/29/16

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 2015-2016

Requesting Campus: Lyndon B. Johnson

Campus Principal: Armando Salazar

Board Member: Aliza Flores-Oliveros

Board Member: _____

Description of Request: Volleyballs, Net, AcuSpike
Hitting machine, Game Day Varsity Polos,
Practice Tops

Estimated Cost of Request \$5,000

Principal or Director Signature: Armando Salazar Date 2/29/16

Associate Superintendent Approval: Yes _____ No _____

Associate Superintendent Signature: _____ Date _____

Superintendent Approval: Yes _____ No _____

Superintendent Signature: _____ Date _____

Board Member Approval: Yes _____ No _____

Board Member Signature: Aliza Date 2

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 2015-2016**

Requesting Campus: Dr. Henry Cuellar Elem

Campus Principal: Melissa Shinn

Board Member: Aliza Flores Oliveros

Board Member: _____

DESCRIPTION OF REQUEST Leader In Me continued implementation of initiative

Estimated Cost of Request \$3,700.00

Principal or Director Signature: Melissa Shinn **Date** 2/24/16

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** _____

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 2015-2016**

Requesting Campus: Antonio Gonzalez Middle

Campus Principal: Patricia Rooney Perez

Board Member: Ramiro Veliz III

Board Member: _____

Description of Request: Beautification of school (Park benches and trees)

Estimated Cost of Request: \$2000.00

Principal or Director Signature: [Signature] Date 1/26/16

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 2015-2016

Requesting Campus: Nye Elementary

Campus Principal: Patricia E. Lanas

Board Member: Mr. Javier Montemayor

Board Member: Mr. Roberto Ramirez

Description of Request: Forde Ferrier Science Workbooks for 5th Grade Students

Estimated Cost of Request \$3,105.00

Principal or Director Signature: Patricia E. Lanas Date 2/26/16

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 2015-2016**

Requesting Campus: MULLER

Campus Principal: MAYRA RAMIREZ

Board Member: ROBERTO RAMIREZ

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 parents sign the planner on a daily basis.

Estimated Cost of Request \$ 3,053.50

Principal or Director Signature: Mayra Ramirez Date 2/24/16

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 2015-2016

Requesting Campus: KENNEDY-ZAPATA ELEMENTARY SCHOOL

Campus Principal: THELMA J. MARTINEZ

Board Member: RICARDO MOLINA SR.

Board Member: _____

Description of Request: LIBRARY BOOKS.

Estimated Cost of Request \$260.32

Principal or Director Signature: [Signature] Date 3/1/14

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 2015-2016

Requesting Campus: Various South Campuses

Campus Principal:

Board Member: Ricardo Molina

Board Member:

Description of Request:

Estimated Cost of Request Up to 15 ea. Positive School Bus Ads for the South Schools

\$90.56 X 15 = \$1,358.40

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: Ricardo Molina Date 3-15-16

By Delia C Campos

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 2015-2016**

Requesting Campus: Bonnie L. Garcia Elem.

Campus Principal: [Signature]

Board Member: _____

Board Member: _____

Description of Request: Annual 4th grade Field Trip

Estimated Cost of Request 500.00

Principal or Director Signature: [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: [Signature] Date 3-4-16

Board Member Approval: Yes [Signature] 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: U.I.S.D. - Police Department

Campus Principal: Chief Clemente Camarillo

Board Member: _____

Board Member: Javier Montemayor - _____

Board Member: _____

DESCRIPTION OF REQUEST: Student Safety Patrol Program and stop signs for crossing guards/ students

Estimated Cost of Request \$ 3,000.00

Principal or Director Signature: [Signature] Date 3-16-16

Associate Superintendent Approval: Yes No

Associate Superintendent Signature: _____ Date _____

Superintendent Approval: Yes No

Superintendent Signature: _____ Date _____

Board Member Approval: Yes No

Board Member Signature: Javier Montemayor Date _____

By Delia Campos

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.