

**Board Action:** ☐ N/A (Info) ☐ Approved ☐ Denied ☐ Tabled to: \_\_\_\_\_



**2019 STATE BASKETBALL TOURNAMENT: BUTTE,  
MT- NOVEMBER 7-9, 2019**

Taking place in Butte and the surrounding area, the State Basketball Tournament features approximately 40 delegations from across Montana coming together to compete. It is a three day event, with November 7th featuring opening ceremonies, November 8th being a pool play day and featuring the Carnival and Dance, and November 9th being bracketed tournament play in the pursuit of first place! For more



BROWNING PUBLIC SCHOOLS  
Leave Report/Travel Request

Employee Name Maureen Stott  
Building Special Services

Employee #89437  
Substitute Name NA

**LEAVE REPORT**

Date of Leave

11/8/2019

Hours

8 Hours

Type of Leave

SR

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

SL Sick Leave

\*EX/SR Extra-Curricular/School Related

PL Personal Leave

JD Jury Duty (attach verification)

NG National Guard

FN Funeral \_\_\_\_\_

(Master Contract Relationship)

ALWO Approved Leave W/O Pay

ULWO Unapproved Leave w/o Pay

SWP Suspended w/Pay

SWOP Suspended w/o Pay

**\*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 Special Olympics State Basketball Tournament 2019 (Attach Brochure/Agenda)

Location Butte, MT

Departure Date 11/08/19

Return Date 11/09/19

Departure Time 08:00 am

Return Time 7:00 pm

Transportation: ☒ Personal Vehicle

Mileage 472 RT @ \$0.58 =\$273.76

☐ District Vehicle

Per Diem N/A =\$

☒ Professional Development

☐ Registration PO# N/A =\$

☐ Hotel PO#  =\$110.00

☐ Other PO#  =\$

☐ Other PO#  =\$

**Sub Total** \$383.76

Budget 126-60-720-3590-582 (75 %) \$205.32

226/60-720-3590-582 (25 %) \$ 68.44

**Check Total** **\$273.76**

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

Principal/Supervisor \_\_\_\_\_ Date \_\_\_\_\_

Superintendent Signature \_\_\_\_\_ Date \_\_\_\_\_