

Browning Public Schools
Board Agenda Request
Meeting To Be Held: 9/13/16



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: 9/7/15

To: **Board of Trustees**
 Browning Public Schools

From: John Rouse
Title: Superintendent

Subject: **In State Travel - Title I**

Description: Request travel for John Rouse, Jeri Matt, Tonia Tatsey, Jennifer Wagner to attend the OPI Title I School Support training in Helena, MT on October 10th & 11th

Financial Impact: \$ 386.88/person

Funding Source (Budget/grant, etc.): Salaries, benefits, and payroll costs to be charged against MSRP or MSRP-School Improvement grants.

Attachment(s): Travel Request/Agenda

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

Comments: _____

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



Montana
Office of Public Instruction
 Denise Juneau, State Superintendent

Office of Public Instruction
 P.O. Box 202501
 Helena, MT 59620-2501
 406.444.3095
 888.231.9393
 406.444.0169 (TTY)
 opi.mt.gov

RECEIVED
 AUG 08 2016
 BY: _____

August 8, 2016

Browning School District
 Napi Elementary School
 John Rouse, Superintendent
 Sicily Bird, Principal
 Stacy Edwards, District Clerk
 112 First Avenue South East
 Browning, MT 59417

Dear Mr. Rouse, Ms. Bird, and Ms. Edwards:

Congratulations! Based on the grant review process, Napi Elementary School's application for the Title I School Support Grant has been recommended for funding. In order to finalize the approval process, please complete the following steps by August 24, 2016 to ensure a smooth transition to the implementation process and avoid discontinuation of funds for not fulfilling the agreed upon obligations.

1. Review the following budget.

Budgeted Item	Description	Proposed Amount	Actual Amount Allowed
Consultant	2 days/mo. x 6 mos. (excluding Dec. and May)	\$8,000	*\$30,000
Math assessments	STAR Math – District funded	\$0	\$0
Stipends	21 teachers x 3 days x \$100	\$6,300	\$6,300
Substitute costs	3 subs x 4 days x 4 times/year x \$90	\$4,320	\$4,320
Travel and PD in Helena	Hotel, per diem, and fuel	\$3,500	\$3,500
Professional Development	NCTM Training	\$9,900	*\$0
Materials	Various	\$7,250	\$7,250
Technology Equipment	☞ Requires OPI approval > \$5,000	☞ \$5,730	☞ \$5,730
TOTAL GRANT FUNDING		\$45,000	\$57,100

*indicates a significant difference in proposal amount. Clarification needed. Contact Kathi Tiefenthaler at (406)444-1872 to finalize the funding determinations.

2. Choose your national consultant from the enclosed one-page descriptors from each firm that applied to support math. Call or email the contact person for the consulting firm to notify them which consultant your school is interested in contracting. The contact person will explain the next steps in securing that consultant. It is your responsibility to coordinate visits, secure a contract, and pay the firm. The requirement of the grant is two days with the

ask what for?

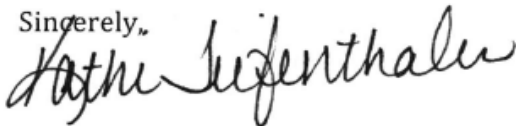
national consultant each month for six months (excluding December and May) not to exceed \$30,000.

3. For your information, your state contact for the Title I School Support Grant is Terri Barclay. She can be reached at tbarclay2@mt.gov or (406)444-0753. Share with your state contact your consultant choice and the firm they are associated with, the dates of the school visits that have been determined, and names and email addresses of each member of your Math Leadership Team.
4. An assessment is required for your area of focus either through grant funding or district funding. The assessments must include: (1) Benchmark assessments to be given three times per year and (2) Frequent progress monitoring assessments. The approved math assessment Napi Elementary School has chosen is STAR Math. Once the assessment is set up, provide your state contact and consultant a login to the assessment management site, which will also be used for program-wide analysis.
5. It is required that the Math Leadership Team including the principal attend two trainings. Both will be at the Radisson Colonial Hotel in Helena from 8 a.m.–5 p.m. The first training will be on October 10 & 11, 2016, and the second training will be February 6 & 7, 2017. Reservations may be made by contacting the hotel directly at (406)443-2100 using OPI-Title I School Support for the room block. Room reservations for the first training must be made by September 9, 2016, and by January 6, 2017, for the second training. You may also book your room online at <http://www.radisson.com/reservation/itineraryEntrance.do?hotelCode=USAHEMT&promotionalCode=T1SS>. Agendas will be provided at least one month prior to the training.
6. Napi Elementary School's budget needs to be approved. Please contact Kathi Tiefenthaler at (406)444-1872 to discuss the budget. An approval email with next steps will be sent to the superintendent, principal, and district clerk once finalized.

We thank you and your team again for submitting your application and for the hard work you do on behalf of the students in your district.

Please feel free to contact me if you have any questions. If you would like feedback from the grant review process for future reference, please email lgriffin3@mt.gov to request it.

Sincerely,



Kathi Tiefenthaler

Title I School Support Unit Director,
Montana Office of Public Instruction

- Phone: 406-444-1872
- Website: www.opi.mt.gov
- Email: ktiefenthaler@mt.gov

The Montana Office of Public Instruction provides vision, advocacy, support, and leadership for schools and communities to ensure that all students meet today's challenges and tomorrow's opportunities.

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

Employee Name sample leave request
Building _____

Employee # _____
Substitute Name NA

LEAVE REPORT

<u>Date of Leave</u>	<u>Hours</u>	<u>Type of Leave</u>
<u>10/10 & 10/11</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 <u>SR</u>	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 Title I School Support Training Attach Brochure/Agenda

Location Helena, MT

Departure Date 10/9/16

Return Date 10/11/16

Departure Time 2:00 p.m.

Return Time 7:00 p.m.

Transportation: Personal Vehicle
 District Vehicle
 Professional Development

Mileage 344 x .54 / 2 = 92.88

Per Diem 2 days + supper = 85.00

Registration _____ PO# _____ = - 0 -
 Hotel _____ PO# _____ =209.00
 Other _____ PO# Airfare = - 0 -
 Other _____ PO# Luggage = - 0 -

Sub Total \$386.88

Budget Title I Grant (70%) \$ 177.88
_____ (30%) \$ _____

Check Total \$177.88

Employee Signature _____ Date _____

Principal/Supervisor _____ Date _____

Superintendent Signature _____ Date _____