

Browning Public Schools
Board Agenda Request
Meeting to Be Held: 3/30/22



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: 3/30/22

To: **Corrina Guardipee-Hall ED.S.**
 Superintendent

From: Everett Holm
Title: Technology Director

Subject: **Out of state travel: COSN (Consortium of School Networking) 2021-2022**

Description: Attendance as part of duties serving as META President. Airfare, conference fees and hotel are being paid by the SAM office.

Financial Impact: \$688.59

Funding Source (Budget/grant, etc.): Technology 126/226-78-162-2220-582

Attachment(s): Travel Request/Conference Agenda

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

Comments: _____

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

BROWNING PUBLIC SCHOOLS
Leave Report/Travel Request

Employee Name Everett Holm
Building Technology

Employee # _____
Substitute Name NA

LEAVE REPORT

<u>Date of Leave</u>	<u>Hours</u>	<u>Type of Leave</u>
<u>4/9-14/19</u>	<u>32</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 COSN Conference Attach Brochure/Agenda

Location Nashville, TN

Departure Date 4/9/22

Return Date 4/14/22

Departure Time 6:00 a.m.

Return Time 10:30 p.m.

Transportation: Personal Vehicle
 District Vehicle
 Professional Development

Mileage 254 @.585 = \$ 148.59

Per Diem 6@\$90 = \$ 540.00

Registration PO# paid by SAM = 0.00

Hotel PO# paid by SAM = 0.00

Other PO# airfare paid by SAM = 0.00

Other PO# = 0.00

Sub Total 688.59

Budget 126.78.162.2220.0582 (75%) \$516.44
226.78.162.2220.0582 (25%) \$172.15

Check Total \$ 688.59

Employee Signature _____ Date _____

Principal/Supervisor _____ Date _____

Superintendent Signature _____ Date _____