

Browning Public Schools
Board Agenda Request
Meeting to Be Held: 11/28/17



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: 11/16/17

To **Corrina Guardipee-Hall**
 Superintendent

From: Dennis Juneau
 Title: BMS Principal

Subject: **In State Travel: Montana Behavioral Institute**

Description: Request approval for Angela HeavyRunner to attend MBI in Helena MT October 22-23, 2017.

Financial Impact: \$ 302.02

Funding Source (Budget/grant, etc.):

Attachment(s): Agenda/Travel Request

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

Comments: _____

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

Elsie Arntzen, Superintendent
PO Box 202501
Helena, MT 59620-2501
406 444 5643
In-State toll-free: 1.888.251.9393
TTY Users: 406 444 0235
opi.mt.gov

OFFICE OF PUBLIC INSTRUCTION
STATE OF MONTANA

Putting Montana Students First **A⁺**



Invitation MBI Fall Training 2017

Dear MBI Team!

Welcome to a new school year!

If your team is prepared for the next phase in the MBI training, your team is invited to attend Session 3 of MBI Team Training. Please plan to bring up to six members of your team.

Please remember all MBI team trainings are now one day only. We will begin at 9:00 to allow for morning travel and conclude at 4:30. We encourage you to attend training in your own region to reduce travel costs. Tier II Training is offered at the following dates and locations:

September 18, 2017 – Sidney – Richland County Extension Office
September 25, 2017 – Billings- MSU-B, COE Rm. 122 or 160
October 2, 2017 – Missoula – Doubletree by Hilton, Missoula - Edgewater
October 9, 2017 – Great Falls – Holiday Inn – 1100 5th Street South
October 23, 2017 – Helena – The Wingate by Wyndham

For the training, please bring the following:

- Laptops to share as a team
- Hardcopy of session III workbook
- Action plan, TIPS II forms
- Copy of Agenda (see attachment)
- Copy of your TFI and SAS results

With the revamping of the OPI Website, **Training Materials will be emailed to you or a link will be provided to download. Please print your own hard copies; copies will not be provided at the training.**

The Office of Public Instruction will reimburse mileage for up to two vehicles and per diem at current state rates. Meals will be on your own. **Please complete and return the attached RSVP to Kelley Brown (kbrown8@mt.gov) as soon as possible.**

For questions, please contact your consultant or Denise DesJarlais at ddesjarlais@mt.gov or 406-855-2126. We look forward to seeing you and working with you again.

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

Employee Name: Angela Heavy Runner
Building Middle School

Employee # _____
Substitute Name _____

LEAVE REPORT

<u>Date of Leave</u>	<u>Hours</u>	<u>Type of Leave</u>
10/22/17-10/23/17	<u>16</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: Montana Behavioral Institute **(Attach Brochure/Agenda)**

Location: Helena, Montana

Departure Date 10/22/17

Return Date 10/23/17

Departure Time 4:00 pm

Return Time 8:00 pm

Transportation:

Personal Vehicle

District Vehicle

Professional Development

Mileage 172 x .535 = \$ 92.02

Per Diem 1 day @ \$35 + \$15 D = \$ 50.00

Registration PO# _____ = _____

Hotel PO# _____ = \$ 160.00

Other PO# _____ = _____

Other PO# _____ = _____

Sub Total \$ 302.02

Budget 115.90.465.1000.582.206 (100 %) 142.02
_____ (_____ %)

Check Total \$ 142.02

Employee Signature _____

Date _____

Principal/Supervisor _____

Date _____

Superintendent Signature _____

Date _____