

Browning Public Schools
Board Agenda Request
Meeting To Be Held: 5/26/21



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: 5/17/21

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

From: Corrina Guardipee-Hall
Title: Superintendent

Subject: In State Travel: IISM Call to Conference 2020-2021

Description: Request travel for Board of Trustees and Corrina Guardipee-Hall to attend the IISM Call to Conference Meeting in Ronan, MT. 6/17/21 thru 6/18/21

Financial Impact: \$ 501.76 ea

Funding Source (Budget/grant, etc.): Superintendent Travel Budget

Attachment(s): Travel Request/Agenda

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

Comments: _____

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

INDIAN IMPACTED SCHOOLS OF MONTANA [IISM]
CALL TO CONFERENCE

IISM Reintroduction Conference

June 17th and 18th, 2021

(Meeting times are from 9:00 a.m. to 12:00 p.m. Business- Membership Meeting on the 18th may extend into the afternoon)

Ronan School-Specific Location TBD

Flathead Reservation, Montana

Hotel Reservations @ QwaTukNuk, Polson—Rooms Released on May 16;
Special Rate \$109.65

Reservation Center 406-883-3636—IISM Conference group code 2822

Featured speaker/highlights/events

- ✓ IISM Annual Meeting & Establishment of Membership Dues
- ✓ Invited presenter—Max Schochenmaier, South Dakota Schools Impact Aid Association
- ✓ Working to re-establish the organization to serve member schools
- ✓ By-Laws review and input from member schools
- ✓ Basics of Impact Aid training and updates
- ✓ Member school Question & Answer opportunities
- ✓ Understanding how Impact Aid Affects and Benefits Your School District

For information contact: Jim Baldwin, baldwinjim5573@gmail.com or call (406) 239-1830.

BROWNING PUBLIC SCHOOLS
Leave Report/Travel Request

Employee Name Corrina Guardipee-Hall
Building Browning Public Schools

Employee # _____
Substitute Name NA

LEAVE REPORT

| | | |
|-----------------------------------------------------|--------------------------------|------------------------------------|
| <u>Date of Leave</u> <u>6/17 & 6/18 2021</u> | <u>Hours</u> <u>16 Hour</u> | <u>Type of Leave</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 IISM Call to Conference (Attach Brochure/Agenda)

Location Ronan, MT

Departure Date 6/16/21

Return Date 6/18/21

Departure Time 2:00 p.m.

Return Time 5:00 pm

Transportation: ☒ Personal Vehicle
☐ District Vehicle
☐ Professional Development

Mileage 306 x .56 = \$171.36
Per Diem 2 Days @ \$36+\$15D = \$ 87.00

☐ Registration PO# _____ = \$ 0.
☒ Hotel PO# _____ = \$243.40
☐ Other PO# _____ = \$ 0.

To be reimbursed: shuttle/taxi/parking upon return of receipts

Sub Total \$501.76

Budget 126.90.160.2310.582 (75%) \$193.71
226.90.160.2310.582 (25%) \$ 64.59

Check Total \$258.36

Employee Signature _____ Date _____

Principal/Supervisor _____ Date _____

Superintendent Signature _____ Date _____