



			<del></del>			
Recognit	tion: Students	Staff	Parents			
Informat	tion:	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:	1/3/17					
To:	Board of TrusteesFrom:Dennis JuneauBrowning Public SchoolsTitle:BMS Principal					
Subject:	In state travel:					
<b>Descript</b> 12, 2018.	1 .	Runner to attend Check In	/Check Out in Helena, MT on Feb 11-			
Financia	d Impact: \$245.74					
Funding	Source (Budget/grant, etc.):	115.90.465.1000.582.20	6			
Attachm	ent(s): PD Objectives, Leave	e Slip, program				
Approva	d: Superintendent's Office/Fi	nance/Personnel as applic	able (Initial)			
Commer	nts:					
Board A	ction: N/A (Info)	Approved Denie	ed Tabled to:			

## The Behavior Education Program (BEP): a Check-in, Check-out (CICO) Intervention for Students at Risk

## Team Training Agenda Wingate Hotel, Helena, MT February 6, 2017

\*Each block of time will include presentation of implementation core components and team time to work

8:30-9:00

Critical Features of Tier 2 Interventions

9:00-9:30

Setting the Systems for implementing the Behavior Education Program (BEP)

9:30-10:00

**Developing a Daily Progress Report** 

10:00-10:15 Beak

10:15-10:45

Reinforcement System for students on the BEP

10:45-11:30

Referral System for the BEP

11:30-12:30 Lunch

12:30-1:15

Managing Daily Data

1:15-1:45

Fading Students off of the Intervention

1:45-2:45

- Staff Training
- Student Orientation
- Parent Training

2:45-3:15

Expanding CICO to other Secondary Supports: Social/Academic Groups and Mentoring

3:15-3:30

Wrap up and Closing

## BROWNING PUBLIC SCHOOLS Leave Report/Travel Request

Employee Name Angela Heavy Runner Building BMS		Employee #10228 Substitute Name <u>NA</u>				
LEAVE REPORT <u>Date of Leave</u> 211/2018-2/12/1028	<u>Hours</u> <u>8</u>	<u>s</u> <u>1</u>	Type of Leave SR	2		
Employee Signature		Date _				
Approved; Condition upon the specific Principal/Supervisor		ve being available for the specific employee Not Approved  Date				
TYPE OF LEAVE  AN Annual SL Sick Leave *EX/SR Extra-Curricular/School Related	FN Funeral (Master Contract Re	erification) U S lationship)	JLWO Unappr SWP Suspend SWOP Suspend	ded w/o Pay		
*If taking School Related/Extra-Curricular TRAVEL REQUEST (If receiving page 1)						
Conference/Workshop MBI Check in /	Check Out (Attach Br	ochure/Agenda)				
Location Helena, MT.  Departure Date 2/11/2018  Departure Time 4:00 p.m  Transportation:	Return 7	Date <u>2/12/2018</u> Time <u>8:00 p.m.</u>	loogo 244 v	525 ¢ 02.74		
Transportation:		Per Diem 1 da	leage <u>344 x .</u> y @ \$35 + 1 l			
	Бечеюршеш	<ul><li>✓ Registration</li><li>✓ Hotel PO#</li><li>✓ Other PO#</li><li>✓ Other PO#</li></ul>	Airfare Luggage	=\$ 103.00 =\$ 00		
Budget 115.90.465.1000.582.206 (100			k Total \$143.74			
Employee Signature			Date			
Principal/Supervisor						
Superintendent Signature						