



UNITED INDEPENDENT SCHOOL DISTRICT AGENDA ACTION ITEM

TOPIC Approval of Requests from Board Members in re: Use of Board of Trustees Discretionary

Funds for Various Projects/Campuses

SUBMITTED BY: Judd Gilpin **OF:** Board President

APPROVED FOR TRANSMITTAL TO SCHOOL BOARD: November 28, 2012

RECOMMENDATION:

It is recommended that the United ISD Board of Trustees approve Requests from Board Members in re: Use of Board of Trustees Discretionary Funds for Various Projects/Campuses.

RATIONALE:

BUDGETARY INFORMATION:

BOARD POLICY REFERENCE AND COMPLIANCE:



Exhibit A

United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2012-2013

Requesting Campus: Juarez Lincoln Elementary

Campus Principal: Melissa Y. Cruz

Board Member: Ricardo Molina

Board Member: _____

Description of Request: Juarez-Lincoln is requesting new screens for the ECC classrooms because the existing ones are old and worn and technology cannot be used effectively. Secondly, we are requesting music instruments for our music classes and materials for our pre-kinder classes.

Estimated Cost of Request \$6,100.00

Principal or Director Signature: Melissa Y. Cruz Date 10-24-12

Associate Superintendent Approval: Yes _____ No _____

Associate Superintendent Signature: _____ Date _____

Superintendent Approval: Yes _____ No _____

Superintendent Signature: _____ Date _____

Board Member Approval: Yes No _____

Board Member Signature: Ricardo Molina Date 11/3/12

Board Member Approval: Yes _____ No _____

Board Member Signature: _____ Date _____

Board Approval: Yes _____ No _____ Date Approved: _____

Please return the completed form to the Superintendent's Office for final processing.



Exhibit A

United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2012-2013

Requesting Campus: Salvador Garcia Middle School

Campus Principal: Clotilde Gamez

Board Member: Ricardo Molina

Board Member: Ricardo Molina Sr

Description of Request: Purpose Student Licenses to Service
for Reading Comprehension Intervention Program
(Acheque 3000 believe) focused on increasing student
lexile reading level
Estimated Cost of Request 10,000 approx. 3008 do

Principal or Director Signature: Clotilde Gamez Date 10/18/12

Associate Superintendent Approval: Yes No

Associate Superintendent Signature: _____ Date _____

Superintendent Approval: Yes No

Superintendent Signature: _____ Date _____

Board Member Approval: Yes No

Board Member Signature: Ricardo Molina Date 11/3/12
by Alampor

Board Member Approval: Yes No

Board Member Signature: _____ Date _____

Board Approval: Yes No Date Approved: _____

Please return the completed form to the Superintendent's Office for final processing.



Exhibit A

**United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2011-2012**

Requesting Campus: United South High School

Campus Principal: David R. Canales

Board Member: Juan A. Molina

Board Member: _____

Description of Request: _____

Please see attached

Estimated Cost of Request \$11,035.40

Principal or Director Signature: [Signature] **Date** 9/28/12

Associate Superintendent Approval: Yes No

Associate Superintendent Signature: _____ **Date** _____

Superintendent Approval: Yes No

Superintendent Signature: _____ **Date** _____

Board Member Approval: Yes No

Board Member Signature: [Signature] **Date** 10/19/12

Board Member Approval: Yes No

Board Member Signature: _____ **Date** _____

Board Approval: Yes No **Date Approved:** _____

Please return the completed form to the Superintendent's Office for final processing.



Exhibit A

United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2011-2012

Requesting Campus: United South High School

Campus Principal: David R. Canales

Board Member: Ricardo Rodriguez

Board Member: _____

Description of Request: _____

Please see attached

Estimated Cost of Request \$9450⁰⁰

Principal or Director Signature: [Signature] Date 9-28-12

Associate Superintendent Approval: Yes ___ No ___

Associate Superintendent Signature: _____ Date _____

Superintendent Approval: Yes ___ No ___

Superintendent Signature: _____ Date _____

Board Member Approval: Yes ___ No ___

Board Member Signature: _____ Date _____

Board Member Approval: Yes No ___

Board Member Signature: [Signature] Date 10-19-2012

Board Approval: Yes ___ No Date Approved: _____

Please return the completed form to the Superintendent's Office for final processing.



Exhibit A

**United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2012-2013**

Requesting Campus: Bonnie L. Garcia Elem.

Campus Principal: Clare Flores

Board Member: Rick Rodriguez

Board Member: _____

Description of Request: \$ 5000.00 for campus wide Attendance incentives and Field trips.

Estimated Cost of Request \$5000.00

Principal or Director Signature: Clare Flores Date 10/30/12

Associate Superintendent Approval: Yes No

Associate Superintendent Signature: _____ Date _____

Superintendent Approval: Yes No

Superintendent Signature: _____ Date _____

Board Member Approval: Yes No

Board Member Signature: _____ Date _____

Board Member Approval: Yes No

Board Member Signature: _____ Date _____

Board Approval: Yes No Date Approved: _____

Please return the completed form to the Superintendent's Office for final processing.



Exhibit A

**United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2011-2012**

Requesting Campus: United South High School

Campus Principal: David R. Canales

Board Member: Ricardo Rodriguez

Board Member: _____

Description of Request: New York City,
National High School Model United Nations
Conference.

Estimated Cost of Request 6,000.00

Principal or Director Signature: _____ **Date** _____

Associate Superintendent Approval: Yes _____ No _____

Associate Superintendent Signature: _____ **Date** _____

Superintendent Approval: Yes _____ No _____

Superintendent Signature: _____ **Date** _____

Board Member Approval: Yes _____ No _____

Board Member Signature: _____ **Date** _____

Board Member Approval: Yes No _____

Board Member Signature: _____ **Date** 10/19/12

Board Approval: Yes _____ No **Date Approved:** _____

Please return the completed form to the Superintendent's Office for final processing.