

Browning Public Schools
Board Agenda Request
Meeting to Be Held: 1/31/2024



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: 1/22/2024

To: Board of Trustees
 Browning Public Schools

From: Corrina Guardipee-Hall
Title: Superintendent

Subject: **In State Travel: MASS Meeting 2023-2024**

Description: Request travel to attend the MASS Meeting in Helena, MT March 11 & 12, 2024.

Financial Impact: \$539.92

Funding Source (Budget/grant, etc.):126.90.160.2320.582

Attachment(s): Travel Request/ 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 Corrina Guardipee-Hall
Building Administration

Employee # _____
Substitute Name NA

LEAVE REPORT

<u>Date of Leave</u>	<u>Hours</u>	<u>Type of Leave</u>
<u>3/11, 3/12, 2024</u>	<u>20</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 MASS Meeting **(Attach Brochure/Agenda)**

Location Helena, MT

Departure Date 3/10/24

Return Date 3/12/24

Departure Time 2:00 p.m.

Return Time 7:00 p.m.

Transportation: Personal Vehicle
 District Vehicle
 Professional Development

Mileage 344 @ .655 = \$ 225.32

Per Diem 2 days \$51 + \$20S = \$ 122.00

Registration PO# _____ = \$ 0.00

Hotel PO# _____ = \$192.60

Other PO# _____ = \$ 0.00

Other PO# _____ = \$ 0.00

Sub Total \$ 539.92

Budget 126.90.160.2420.582 (75 %) \$260.49

Budget 226.90.160.2420.582 (25 %) \$ 86.83

Check Total \$ 347.32

Employee Signature _____ Date _____

Principal/Supervisor _____ Date _____

Superintendent Signature _____ Date _____