	OUT-RADI	US STAFF TR	AVEL RE	EQUES	TFORM	M	
		MINIDOKA COUNTY JOINT	SCHOOL DISTRICT #	331		Nou16 #	F1
DATE SUBMITTED:	10/11/2016	NAME OF STAFF TRAVELING:	Candice Gardner				
(Submit	NOTE: OUT OF RADIUS IS TRAVEL OVER 300 MILES AND MUST BE APPROVED BY THE BOARD; A SEPARATE FORM MUST BE FILLED OUT FOR EACH TYPE.						
		IENTAL RULES AND REGULATIONS, OR C					
Date(s) of Travel	NAME OF CONFERENCE, WORKSHOP, OR ACTIVITY	LOCATION OF CONFERENCE, WORKSHOP, OR ACTIVITY CITY & STATE	ITEMIZED EXPENSES (INCLUDE AIRFARE, MEALS, MILEAGE, REGISTRATION, LODGING, SHUTTLE, CAR RENTAL, ETC.) & TOTAL	TOTAL COST OF EXPENSES	Amount employee Will pay	AMOUNT REQUESTED FOR DISTRICT TO PAY	SPECIFIC FUNDING SOURCE
JUNE 5-9, 2017	STATE CAREER DEVELOPMENT EVENTS	UNIVERSITY OF IDAHO, MOSCOW, ID	MEALS \$ 265 MILEAGE LODGING \$ 400 REGISTRATION \$ 30 AIRFARE OTHER	\$ 695.00	\$-	\$ 695.00	CTE ACCOUNT
			MEALS MILEAGE LODGING REGISTRATION AURFARE OTHER	\$-	\$-	\$-	
			MEALS MILEAGE LODGING REGISTRATION AIRFARE OTHER	\$-	\$-	\$-	
			MEALS MILEAGE LODGING REGISTRATION AIRFARE OTHER	\$ -	\$ -	\$ -	
WHY TRAVEL IS REQUIR Supervise FFA members at	ED OR RECOMMENDED?	Events		\$ 695.00		\$ 695.00	
	E FOR ATTENDING WORKSHOPS s attending State Career Develo	, CONFERENCES OR ACTIVITIES? pment Events		- 18 -	é.		
How will the INFORM Good news report to sc		EL BE SHARED WITH STAFF AND TH	E BOARD?				
이렇지???? 그가 장거에게 가지 한다가?? 물러가장 드러들까? 가장		SESSED (OBSERVATIONS, ASSESS dividual and team placing in comp		experience, pract	ice attendance, a	nd participation ir	ı event.
	INCOMPL	RAVEL REIMBURSEMENT FORM MUST AL			ON.		
SIGNATURE OF SUPERVISO	thall		HE C				
SIGNATURE OF SUPERINTER	NDENT: 10-14-16		Acco	ounts Payable		BOARD APPROVAL DATE:	
100	District Service Ctr.			Last Update: 10/13/2014			

OUT-RADIUS STAFF TRAVEL REQUEST FORM							
MINIDOKA COUNTY JOINT SCHOOL DISTRICT # 331 Noulle #2							
DATE SUBMITTED:	10/12/2016	NAME OF STAFF TRAVELING:			Maria (Quela) Renz		
(SUBMIT					300 miles and mu: r each type.	ST BE APPROVED BY	THE BOARD; A
LIST TRIP(S) THAT ARE	REQUIRED BY GRANT, OR GOVERNM	ENTAL RULES AND REGULATIONS, OR C IS THE FIRST MONDAY OF EACH MONTH					
DATE(S) OF TRAVEL	NAME OF CONFERENCE, WORKSHOP, OR ACTIVITY	LOCATION OF CONFERENCE, WORKSHOP, OR ACTIVITY CITY & STATE	ITEMIZED EXPENSES (INCLUDE AIRFARE, MEALS, MILEAGE, REGISTRATION, LODGING, SHUTTLE, CAR RENTAL, ETC.) & TOTAL		AMOUNT EMPLOYEE WILL PAY	AMOUNT REQUESTED FOR DISTRICT TO PAY	SPECIFIC FUNDING SOURCE
April, 30- May 3, 2016	2017 NATIONAL MIGRANT Education Conference	Orlando, FL	MEALS MILEAGE LODGING REGISTRATION AIRFARE OTHER \$ 300	\$ 300.00	\$-	\$ 300.00	Migrant PD
		5	MEALS MILEAGE LODGING REGISTRATION AIRFARE OTHER	\$-	\$-	\$-	
			MEALS MILEAGE LODGING REGISTRATION AIRFARE OTHER	\$-	\$-	\$	
			MEALS MILEAGE LODGING REGISTRATION AIRFARE OTHER	\$ -	\$ - Total:	\$-	
the second se	WHY TRAVEL IS REQUIRED OR RECOMMENDED?					TOTAL:	
Professional Development i	Professional Development for Migrant Preschool					\$ 300.00	
WHAT IS YOUR PURPOSE FOR ATTENDING WORKSHOPS, CONFERENCES OR ACTIVITIES? Learning teaching strategies, assessment, for student achievement and program improvement.							
How will the information gained from this travel be shared with staff and the board? Board presentation that will share information and ideas gained through conference participation. Will share skills and knowledge with district administrators and staff in preschool positions.							
HOW WILL THE EFFECTIVENESS OF THE TRAINING BE ASSESSED (OBSERVATIONS, ASSESSMENTS, ETC.)?							
Observation and assessment and ongoing discussion.							
A TRAVEL REIMBURSEMENT FORM MUST ALSO BE FILLED OUT TO REQUEST PERDIEM INCOMPLETE TRAVEL REQUESTS WILL BE RETURNED FOR ADDITIONAL INFORMATION.							
SIGNATURE OF SUPERVISOR/ADMINISTRATOR: HUMAN HUMAN U-12-110							
SIGNATURE OF SUPERINTEN	идеит:	10-13-16				BOARD APPROVAL DATE: Last Up	date: 10/13/2014

Nou16#3

		Minidoka County Joir	nt School District # 331				
	11/3/2016						
date Submitted:		NAME OF STAFF TRAVELING:			Tina Williams		
	(Submit Typed Forms only; do not print and	Note: Out of Radius is tra out for each type.	vel over 300 miles and	must be approved by t	the board; A separate fo	orm must be filled	
List trip(s) that are require	d by grant, or governmental rules and regulati			ests are subject to appr	oval. the deadline for	all trip requests is the fir	st Monday of each
		month (all out-of-RADIUS trip requests are	reviewed at the september	board meeting).		1	
Date(s) of Travel	Name of conference, workshop, or activity	Location of conference, workshop, or activity City & State	Itemized Expenses (include airfare, meals, mileage, registration, lodging, shuttle, car rental, etc.) & Total	total cost of expenses	Amount employee will pay	Amount requested for district to pay	Specific Fundin Source
January 25-28, 2017	Winter Edufest 2017	Coeur d'Alene	meals \$ 110 mileage \$ 149 fodging \$ 315 registration \$ 405 alfare \$ 200 other \$ 119	\$ 1,297.50	\$ -	\$ 1,297.50	
			meals mileage lodging registration airfare other	\$ -	\$-	\$-	
			meðs mileage lodging registration airfare other	\$ -	s -	\$-	
			meals mileage lodging registration airfare other	\$ -	\$ -	\$-	
why travel is required or	recommended?			Total:	Total:	Total:	
	or training in Gifted and Talented Educa			\$ 1,297.50	\$-	\$ 1,297.50	
The purpose for attend low will the information of The information gaine he district who are wo low will the effectiveness	attending workshops, conferences or ac ding to to learn how to meet the ne gained from this travel be shared with st d from this travel will be shared wi orking to meet the needs of gifted a s of the training be assessed (Observation	eds of students who are gifted a aff and the board? th the staff at West Minico Middl and talented students. ns, Assessments, etc.)?	e School at staff mee				
eeds are being met ir	ne training will be assessed by the n the general education classroom.		f the needs of gifted	and talented stud	ents at West Mini		
A Travel Reimbursement F	Form must also be filled out to request Perdie		tional information.			incomplete trave	l requests will be
1	per va		R	ECEIV		1	
ignature of superintendent	< 11-14-16			NOV - b 20:		Board approval date:	
<u>k</u>	2			Accounts Paya District Service	Die Ctr.		

	STUD	ENT TRAVEL	Contraction of the second second second second		RM	Noull	#4
		MINIDOKA COUNTY JOINT	SCHOOL DISTRICT	# 331			
DATE SUBMITTED:	10/4/2016	NAME OF GROUP TRAVELING:	STUDENT COUNCIL				
ADVISOR NAME:	Саті	E SMITH	* NOTE: ADVANCE BOARD APPROVAL IS NECCESARY FOR 1) ALL STUDENT OVERNIGHT TRIPS ALL STUDENT NON-EDUCATIONAL TRIPS IN RADIUS 3) ALL STUDENT TRIPS OUT OF RADIUS.				
(SUBI	MIT TYPED FORMS ONLY; DO NOT PRINT AND	HANDWRITE):	PLEASE USE THE APPI				
LIST TRIP(S) THAT ARE REQUIRE DEADLIN	D BY GRANT, OR GOVERNMENTAL RUL E FOR ALL TRIP REQUESTS IS THE FIRS	ES AND REGULATIONS, OR CONSIDER ST MONDAY OF EACH MONTH (ALL OU	ED IMPERATIVE TO THE O T-OF-RADIUS TRIP REQUE	PERATIONS OF THE STS ARE REVIEWED	DISTRICT. ALL REQU	IESTS ARE SUBJECT BOARD MEETING).	TO APPROVAL. THE
Date(s) of Travel	Description of Activity	Location of activity City & State	ITEMIZED EXPENSES (INCLUDE AIRFARE, MEALS, MILEAGE, REGISTRATION, LODGING, SHUTTLE, CAR RENTAL, ETC.) & TOTAL	TOTAL COST OF EXPENSES	Amount student WILL PAY	Amount requested for district to pay	SPECIFIC FUNDING SOURCE
Feb 23-25, 2017	Student Council State Conference	BSU, Boise, ID	MEALS \$ 25 TRANSFORTATION \$ 776 LODGING \$ 500 REGISTRATION \$ 76 AIRPARE 5 500 OTHER 5 500		\$ 100.00	\$ 825.50	DISTRICT- TRANSPORTATIO N STUDE:NT COUNCIL-HOTEL
			MEALS TRANSPORTATION LODGING REGISTRATION AURTARE OTHER MUALE	\$-	\$-	\$-	
			MEALS TRANSPORTATION LODGING REGISTRATION AIRYARE OTHER	\$-	\$-	\$-	
			MEALS TRANSPORTATION LODGING REGISTRATION AIRFARE OTHER	\$-	\$-	\$-	
WHY TRAVEL IS REQUIRED				TOTAL:	TOTAL:	TOTAL:	
Definitely recommended-This is cannot recreate in the classroo	s needed for the educational opportu m.	nities it provides. This is part of the	leadership curriculum l	\$ 925.50	\$ 100.00	\$ 825.50	-
the second s	DR ATTENDING ABOVE ACTIVITIES ant councils statewide to gain va il award.		nd leading. Minico Hig	No. of Concession, Name		o hoping to receiv	ve the
				F	RECEIVED		
HOW WILL THE INFORMATIC WRITTEN REPORT TO SL WRITTEN REPORT TO BC X GOOD NEWS REPORT TO	DARD	E SHARED WITH STAFF AND THE E	BOARD? (CHECK ONE)	1	CT 19 2016		
PER POLICY #702.47 A COMPLETE TRAVEL PROPOSAL MUST BE SUBMITTED TRAVEL PROPOSAL ATTACHED					ISTRICT OFFICE		
TRAVEL PROPOSAL REC				Deserve		r	
	MITTED PRIOR TO TRAVEL	IT TO REQUEST PERDIEM INCOM	PLETE TRAVEL DEOLIE	PROPOSED DAT			
	ATURE ACKNOWLEDGES COMPLIANCE WITH		I LETE TRAVEL REGOL	SIGNATURE OF PR		TIONAL INFORMA	
Catie ?	Frith			\mathcal{A}	sull P	nulle'	
SIGNATURE OF SUPERINTENDE	ENT: 26-16		e.	BOARD APPROVAL DATE	0		

Last Update: 10/13/2014