



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: Javier Montemayor **OF:** Board President

APPROVED FOR TRANSMITTAL TO SCHOOL BOARD: October 15, 2014

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 2014-2015

Requesting Campus: JBA, UHS, USHS, LBJ, STEP

Campus Principal: _____

Board Member: Pat Campos

Board Member: _____

Description of Request: Motivational Speaker for all High Schools and

STEP Academy

Estimated Cost of Request \$5,000.00

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: Pat Campos Date 10/7/14

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 2014-2015

Requesting Campus: Transportation Compound

Campus Principal:

Board Member: Pat Campos

Board Member:

Description of Request: Parent Festival Incentives and Transportation Incentives

3 - Delivering Safety One Student at a Time 5 - Gift Raffle Pack

20 - 5 Piece Raffle Pack Creates Family Night Excitement

Estimated Cost of Request \$ 129500

Principal or Director Signature: Date

Associate Superintendent Approval: Yes No

Associate Superintendent Signature: Date

Superintendent Approval: Yes No

Superintendent Signature: Date 10-1-14

Board Member Approval: Yes No

Board Member Signature: Date 10/1/14

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 2014-2015

Requesting Campus: John B. Alexander High School

Campus Principal: Ernesto Sandoval Jr.

Board Member: Ms. Pat Campos

Board Member: _____

Description of Request: Printers and ink for classrooms

Estimated Cost of Request \$11,050.00

Principal or Director Signature: [Signature] Date 9/24/2014

Associate Superintendent Approval: Yes No

Associate Superintendent Signature: _____ Date _____

Superintendent Approval: Yes No

Superintendent Signature: _____ Date _____

Board Member Approval: Yes No

Board Member Signature: Pat Campos Date 10/6/14

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 2014-2015**

Requesting Campus: Student Relations/Discipline Management

Campus Principal: Annette Perez

Board Member: Pat Campos

Board Member: _____

Description of Request: Donation to Purchase Annual Anti-Gang, Anti-Bullying
Poster & Video Contest (Incentives for Contest Winners)

Estimated Cost of Request: Total \$ 1,500.00

Principal or Director Signature: *APerez* Date 10-8-14

Associate Superintendent Approval: Yes No

Associate Superintendent Signature: _____ Date _____

Superintendent Approval: Yes No

Superintendent Signature: _____ Date _____

Board Member Approval: Yes No

Board Member Signature: *Pat Campos* Date 10/9/14

Board Member Approval: Yes No

Board Member Signature: _____ Date _____

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 2014-2015**

Requesting Campus: United Middle School

Campus Principal: Rebecca Morales

Board Member: Ricardo Molina

Board Member:

Description of Request: \$1,000.00 to purchase student incentives for PBIS student rewards and \$1,000.00 for Teacher Incentives Perfect Attendance

Estimated Cost of Request: \$2,000.00

Principal or Director Signature: Rebecca Morales **Date** 9/23/14

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** 9-24-14

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 2014-2015

Requesting Campus: Los Obispos Middle School

Campus Principal: Jessica C. Salazar

Board Member: Ricardo Molina Sr.

Board Member:

Description of Request: For PBIS students and teacher incentives.

Estimated Cost of Request \$2,500.00

Principal or Director Signature: [Signature] Date 9/23/14

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 9-24-14

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 2014-2015

Requesting Campus: Salvador Garcia Middle School

Campus Principal: Clotilde Gomez

Board Member: Ricardo Molina

Board Member: _____

Description of Request: Instructional Resources for the Social Studies Department

Estimated Cost of Request \$5268.⁰⁰

Principal or Director Signature: Clotilde Gomez Date 9/16/14

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 9-18-14

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 2014-2015**

Requesting Campus: United South High School

Campus Principal: Adriana Ramirez

Board Member: Ricardo Rodriguez

Board Member: _____

Description of Request:

Money to be used by USHS ACADEMICS
throughout the school year to offset
expenses incurred in local and out-of-town
meets.

Estimated Cost of Request 3000.00

Principal Signature: Adriana Ramirez **Date** 8-29-14

Board Member Approval: Yes No

Board Member Signature: _____ **Date** _____

Board Member Signature: _____ **Date** _____

Superintendent 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 2014-2015

Requesting Campus: Clark Elementary School

Campus Principal: Sandra L. Higareda

Board Member: Javier Montemayor, Jr.

Board Member:

Description of Request: Assistance with the monetary donation of \$3,466.15 (Three thousand, four hundred sixty-six and 15 cents) to cover the cost of the renewal for the Accelerated Reader Program (AR Enterprise Real Time) and the STAR Reading Enterprise Real Time. Both programs are used in conjunction to manage our students' reading and monitor their reading comprehension

Estimated Cost of Request \$3,466.15

Principal or Director Signature: Sandra L. Higareda Date 10/03/2014

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 2014-2015**

Requesting Campus: South Transportation Dept

Campus Principal: _____

Board Member: Ramiro Veliz - 2,000.

Board Member: Rick Rodriguez - 3,779.38

Description of Request: office equipment
(South & East Compound)

Estimated Cost of Request \$ 10,779.38

Principal or Director Signature: [Signature] Date 10/03/14

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 10-1-2014

Board Member Approval: Yes No

Board Member Signature: [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 2014-2015**

Requesting Campus: Lyndon B. Johnson High School

Campus Principal: A. Salazar

Board Member: Ramiro Veliz III

Board Member: _____

Description of Request: Purchase student incentives for Fall/Spring celebrations.

Estimated Cost of Request \$5000.00

Principal or Director Signature: *A. Salazar* Date 9/22/14

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 10.7.14

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 2014-2015

Requesting Campus: Student Relations/Discipline Management

Campus Principal: Annette Perez

Board Member: Ricardo Molina

Board Member:

Description of Request: Purchase Incentives for D.I.V.A.S. Program at Salvador Garcia Middle School

Estimated Cost of Request: Total \$ 1,000.00

Principal or Director Signature: [Handwritten Signature] Date 10-3-14

Associate Superintendent Approval: Yes ___ No ___

Associate Superintendent Signature: ___ Date ___

Superintendent Approval: Yes ___ No ___

Superintendent Signature: ___ Date ___

Board Member Approval: Yes [checked] No ___

Board Member Signature: [Handwritten Signature] Date ___

Board Member Approval: Yes ___ No ___

Board Member Signature: ___ Date ___

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 2014-2015**

Requesting Campus: Student Relations/Discipline Management

Campus Principal: Annette Perez

Board Member: Ricardo Molina

Board Member: _____

Description of Request: Donation to Purchase Annual Anti-Gang, Anti-Bullying

Poster & Video Contest (Incentives for winners)

Estimated Cost of Request: Total \$ 1,000.00

Principal or Director Signature: *Annette Perez* Date 10-3-14

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 _____

Board Member Approval: Yes No

Board Member Signature: _____ Date _____

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 2014-2015**

Requesting Campus: Lyndon Baines Johnson High School

Campus Principal: Armando Salazar

Board Member: Ricardo Molina Sr.

Board Member: _____

Description of Request: The LBJ Band Hall is in need of a screen and mounted projector to be able to accommodate for audiences of over 100 during professional Staff development trainings, meetings, and other school-related functions.

Estimated Cost of Request \$7,000.00

Principal or Director Signature: [Signature] Date 9/26/14

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 _____

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 2014-2015

Requesting Campus: Lyndon Baines Johnson High School

Campus Principal: Armando Salazar

Board Member: Ricardo Molina Sr.

Board Member: _____

Description of Request: Funds will be used for student incentives.

Estimated Cost of Request \$4,000

Principal or Director Signature: [Signature] Date 9/26/14

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 _____

Board Member Approval: Yes No

Board Member Signature: _____ Date _____

Board Approval: Yes No Date Approved: _____

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Exhibit A

**United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2014-2015**

Requesting Campus: Paciano Prada Elementary

Campus Principal: Gilbert Castro

Board Member: Ricardo Molina, Sr. District 1

Board Member: _____

Description of Request: Laptop, Document Camera, Data Projector, Projector Lamp.

Estimated Cost of Request \$ 6,712.50

Principal or Director Signature: *[Signature]* Date 9/25/2014

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 _____

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 2013-2014

Requesting Campus: DR. S. PEREZ ELEMENTARY

Campus Principal: MRS. SALUD C. HERNANDEZ

Board Member: Ramiro Veliz III

Board Member: _____

Description of Request: _____

\$10,000.00 FOR LIBRARY USE _____

\$5,000.00 INCENTIVES FOR STUDENTS AND FACULTY & STAFF _____

Estimated Cost of Request \$15,000.00

Principal or Director Signature: [Signature] Date 10-8-14

Associate Superintendent Approval: Yes _____ No _____

Associate Superintendent Signature: _____ Date _____

Superintendent Approval: Yes _____ No _____

Superintendent Signature: [Signature] Date _____

Board Member Approval: Yes No _____

Board Member Signature: [Signature] Date 10-8-14

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.