

Browning Public Schools
Board Agenda Request
Meeting To Be Held: 03/06/17



-
- 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: 03/06/17

To: **John Rouse**
 Superintendent

From: Kimberly Tatsey-McKay
Title: Montana SOARS GMP Director

Subject: **In State Travel- Montana Check and Connect Training**

Description: Kimberly Tatsey-McKay, Montana SOARS Good Medicine Program Director, is recommending in state travel for Jessica Racine, Correna Guardipee-Hall on April 24-26, 2017 and Kimberly Tatsey-McKay, Billie Jo Juneau and Natasha Siliezar on May 16-18, 2017 to attend the Check and Connect Training in Helena, Montana. The two separate trainings are outlined in our 2017 OPI Montana SOARS grant.

Financial Impact: \$381.46 ea (Total: \$1907.30)

Funding Source (Budget/grant, etc.): Salaries, benefits, and payroll costs to be charged against budget for respective building/program/grant as applicable.

Attachment(s): Sample Leave Request, Potential Agenda for training.

Approval: Superintendent's Office/Finance/Personnel as applicable (Initial) _____

Comments: _____

Board Action: N/A (Info) Approved Denied Tabled to: _____

Hello everyone,

Due to the transition to a new superintendent staff, and changes to the contracting process, we've had to make several changes to the dates of trainings because of the contracting delay.

This may negatively or positively impact each of you depending on other activities planned for the school year.

Consultants, please let me know if you can still make this work. I understand if it might be too much.

To Montana SOARS staff – you will have your choice of the two comprehensive trainings. Each training can only hold 30 people, which means that we will need to discuss who is going where on our next call.

The new and final dates are:

April 25-26th – Check and Connect Comprehensive Training; for district staff and the four MBI consultant trainers (Helena College)

May 9-11th – Trainers only (OPI conference room)

May 17-18 – Check and Connect Comprehensive Training; district staff and MBI Consultant trainers (Helena College)

Please add this to the agenda for our future team call.

Thank you!



Iris Ziegler

School Climate Transformation Coordinator

Montana Office of Public Instruction

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BROWNING PUBLIC SCHOOLS
Leave Report/Travel Request

Employee Name _____
 Building _____

Employee # _____
 Substitute Name _____

LEAVE REPORT

<u>Date of Leave</u>	<u>Hours</u>	<u>Type of Leave</u>
<u>4/24/2017</u>	<u>3</u>	<u>SR</u>
<u>4/25 & 26, 2017</u>	<u>16</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 Check and Connect Training on April 25-26, 2017 (Attach Brochure/Agenda)

Location Helena, MT

Departure Date 4/24/2017

Return Date 4/26/2017

Departure Time 3:00 pm

Return Time 7:00 pm

Transportation: Personal Vehicle
 District Vehicle
 Professional Development

Mileage 344 @ .535/2 = \$ 92.06

Per Diem D15+ B 8 + L 12+D15+B+L+D = \$ 85.00

Registration PO# _____ = \$ 0.00
 Hotel PO# 24594 = \$ 205.30
 Other PO# _____ = \$ - 0.00 -
 Other PO# _____ = \$ - 0.00 -

Sub Total \$ 381.46

Budget Montana SOARS Grant (100 %)
115.90.465.2213.582.204

Check Total 176.16

Employee Signature _____ Date _____

Principal/Supervisor _____ Date _____

Superintendent Signature _____ Date _____