

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: December 16, 2015

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:

Budget Amendment as needed.

BOARD POLICY REFERENCE AND COMPLIANCE:



Exhibit A

**United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2015-2016**

Requesting Campus: R. C. Centeno Elementary School

Campus Principal: Laura P. De los Santos

Board Member: Mr. Ramiro Veliz, III

Board Member: _____

Board Member: _____

Description of Request iPADS for 5th Grade

Estimated Cost of Request \$4,986.50

Principal or Director Signature: [Signature] Date 12/2/15

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 _____

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.

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Exhibit A

**United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2015-2016**

Requesting Campus: R. C. Centeno Elementary School

Campus Principal: Laura P. De los Santos

Board Member: Mr. Ramiro Veliz, III

Board Member: _____

Board Member: _____

Description of Request 1 Bus for 4th grade field trip to San Antonio, FIESTA TX

Estimated Cost of Request \$1,350.00

Principal or Director Signature: [Signature] Date 12/2/15

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 _____
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 2015-2016**

Requesting Campus: Lyndon B. Johnson High School

Campus Principal: Armando Salazar

Board Member: Ramiro Veliz Jr.

Board Member: _____

Board Member: _____

Description of Request: Incentives for students

Estimated Cost of Request: \$5,000.00

Principal or Director Signature: [Signature] Date: 12/2/15

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 _____
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 2015-2016**

Requesting Campus: United High School

Campus Principal: Alberto Aleman

Board Member: Javier Montemayor, Jr.

Board Member: _____

Description of Request Trophies and medals for Region VII Scholastic Chess Tournament

Estimated Cost of Request \$732.00

Principal or Director Signature: Alberto Aleman Date 12/3/15

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 _____
Yes No _____

Board Member Signature: Javier Montemayor Date 12/8/15

Board Member Approval: Yes _____ No _____
by Alberto Aleman

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 2015-2016

Requesting Campus: NEWMAN ELEMENTARY

Campus Principal: LETICIA R. GARCIA

Board Member: ALIZA FLORES OLIVEROS

Board Member: _____

Description of Request: ICE MACHINE

Estimated Cost of Request \$3,317.49

Principal or Director Signature: Leticia R Garcia Date 12/04/15

Associate Superintendent Approval: Yes _____ No _____

Associate Superintendent Signature: _____ Date _____

Superintendent Approval: Yes _____ No _____

Superintendent Signature: _____ Date _____

Board Member Approval: Yes No _____

Board Member Signature: Aliza Flores Oliveros Date 12/3/15

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 2015-2016

Requesting Campus: NEWMAN ELEMENTARY

Campus Principal: LETICIA R. GARCIA

Board Member: ALIZA FLORES OLIVEROS

Board Member:

Description of Request: BUILDING LETTERS AND LOGO

Estimated Cost of Request 4,446.00

Principal or Director Signature: Leticia R Garcia Date 12/04/15

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: Aliza Flores Oliveros Date 12/8/15

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.

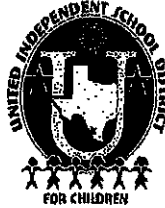


Exhibit A

United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2015-2016

Requesting Campus: Trautmann Elementary

Campus Principal: Mrs. Zaida G. Gonzalez

Board Member: Mr. Javier Montemayor

Board Member:

Board Member:

Description of Request STAAR Workbook Materials

Estimated Cost of Request \$10,000.00

Principal or Director Signature: [Handwritten Signature] Date 12/7/15

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

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.