

Monroe County School District
Out of County Travel - April 9, 2019

Employee Name	Dates	Purpose	Location
Erin Hamilton Gabriel Suarez	March 29-30, 2019	Regional Weightlifting Meet	LeBelle, FL
Tracy McDonald	April 5, 2019	Grad Bash	Orlando, FL
Randy Sokowsky	Apr. 17, 2019	FIU AVID Field Trip	Miami, FL
Omaira Urbay Ally Vu	Apr. 23-24, 2019	WEDDAC	Tallahassee, FL
Sarah Morton	Apr. 24-26, 2019	Council of Language Arts Supervisors Conf.	Orlando, FL
Theresa Axford Sarah Morton Maryanne Nickel	Apr. 30-May 3, 2019	Making Wellness a Priority	Orlando, FL
Melissa Alsobrooks	May 1-3, 2019	Florida Health Schools Conference	Orlando, FL
Gary Hernandez	May 3-5, 2019	Spring Bank Trip	Miami & Tampa
Marianne Nelson	May 5-7, 2019	Florida History Day	Tallahassee, FL
Ramon Dawkins	May 7-9, 2019	FL Educ. Negotiators Conference	Orlando, FL
Suanne Lee	May 13-16, 2019	Florida Assoc. of Public Procurement Officers	Ft. Lauderdale, FL
Gary Hernandez	May 16-18, 2019	State FBA/FMSA Meeting	Daytona, FL
Michael Skrodinsky	May 21-22, 2019	Managing Keying Systems	Miami, FL
Kristen Condella	May 22-24, 2019	FADIMA Cost Analysis	Tampa, FL
Douglas Bickings Jorge Bosque	June 2-7, 2019	FADA Automotive Instructors Summer Training	Orlando, FL
Thomas Hawkins Samuel Ovalle Thomas Salazar	June 9-13, 2019	Annual Bus Technicians Summer Workshop	Daytona Beach, FL
Mark Porter Sue Woltanski	June 12-14, 2019	FSBA/FADSS Summer Conference	Tampa, FL
Sibba Mira Olga P. Vera	June 16-19, 2019	Certiport Conference	Orlando, FL
Laura Lietaert	June 17-19, 2019	ISRA Principal Conference	Orlando, FL

Employee Name	Dates	Purpose	Location
David Owens Marla Russell	June 17-20, 2019	Head Start Regional IV Leadership Conference	Atlanta, GA
Erica Andersen Kristy Bedell Catie Frier Roberty Kirkley Natalie Ledoux Nancy Truesdale	June 23-27, 2019	Pre-AP Training	Tampa, FL
Kristy Bedell	June 25-26, 2019	AP Coordinator Training	Ft. Lauderdale, FL
Dabney Abbott Michelle James	July 7-11, 2019	AP Summer Institute	Gulf Port, FL
Jason Brown Patrick Lefere	July 7-12, 2019	2019 FASRO Conference	Miami, FL
Stanford Hancock	July 21-25, 2019	APSI, Music Theory Training	Tampa, FL
Carl Bish	July 21-26, 2019	APSI Env. Science Training	Tampa, FL
Suanne Lee	Aug. 24-29, 2019	NIGP Government Procurement	Austin, TX



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name **Erin Hamilton**

School/Department **Coral Shores High School**

Position **Teacher**

Requested Dates	
From:	Time
3/29/19	1:30pm
To:	Time
3/30/19	8:00pm
No. of Days:	

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting
Regional Weightlifting Meet

Location:
LaBelle, FL

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

Erin Hamilton

Date: 3/26/19

Approved:

Bob J

Date: 3/28/19

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name Gabriel Suarez

School/Department CSHS

Position Teacher

Requested Dates	
From:	Time
<u>3/29/19</u>	<u>1:30pm</u>
To:	Time
<u>3/30/19</u>	<u>8:00pm</u>
No. of Days:	

Type of Leave Requested

- ☐ VACATION
- ☐ PERSONAL LEAVE ☐ *With Pay ☐ Without Pay
(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)
- ☐ JURY DUTY ☐ MILITARY LEAVE ☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

A Doctor's statement is required for any extended sick leave that exceeds 30 days

ILLNESS

☐ INJURY in the line of Duty

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

Regional Weightlifting Meet LaBelle, FL

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee

Signature: [Signature]

Date: 3/26/19

Approved: [Signature]

Date: 3/28/19

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Requested Dates	
From:	Time
4-5	7:00
To:	Time
4-5	2:30
No. of Days: 1	

Name Tracy McDonald

School/Department

MHS

Position

teacher

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ INJURY in the line of Duty

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting

Corad Bash

Location:

Orlando

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

Approved:

Not

Approved:

Leave

Granted:

Not

Granted:

Date:

Date:

Date:

Date:

Date:



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name

Randi Sokolosky

School/Department

MHS

Position

Teacher

Requested Dates

From: 4/17/19 Time

To: Time

No. of Days: 1

Type of Leave Requested

☐ VACATION

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

A Doctor's statement is required for any extended sick leave that exceeds 30 days

ILLNESS

☐ INJURY in the line of Duty

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

field trip to

Nature of meeting

Location:

FIU w/ AVID

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

R. Sokolosky

Approved:

Wendy M.

Not

Approved:

Leave

Granted:

Not

Granted:

Date:

4/17/19 3/26/19

Date:

3/26/19

Date:

Date:

Date:



SCHOOL BOARD AGENDA ITEM RATIONALE

DATE OF BOARD ACTION:

4/9/19

DISTRICT DEPARTMENT:

DIRECTOR/SUPERVISOR'S SIGNATURE:

Wendy McPhus

SUBJECT:

AVID Class of 2022 field trip

AGENDA ITEM TITLE:

BACKGROUND INFORMATION:

- Freshman AVID Class will tour the Florida Int'l Univ. campus on April 17th as part of the AVID program
- Students dismissed @ 7 a.m and return @ 3 pm

ITEM BUDGETED:

☐ Yes ☐ No ☐ N/A

- Funds from AVID Class account will be used.

RECOMMENDATION:

REVIEWED BY ADMINISTRATION: Yes: ☐

REVIEWED BY ATTORNEY: Yes: ☐ N/A ☐

Marathon High School Activities Request

Approved

Hold

Denied

1. Name of Activity: AVID college trip
2. Type of Activity: Field Trip X or Activity Request or Fundraiser Request _____
(must complete 2nd Fundraiser form)
3. The AVID class of 2022 request permission to schedule the above for
(class, club, organization)
 1. the purpose of: college tour of FIU
 2. Club/Class Sponsor (please print): Randi Sokolosky
 3. Trip destination: FIU in Miami
4. a. Event Date(s) April 17th 6b. Event Time ALL DAY
5. Time of dismissal from class 7b. Time of departure from school 7AM
6. a. Cost to Students \$25 8b. #of Students Attending 25 8c. # of Chaperones 3
7. a. Students attending school lunch? NO 9b. Cafeteria notified? Yes
8. Will the auditorium, media center, or any field be used? Auditorium NO (sched w/ Joe)
Media Center No (sched w/ Kathy) Field: No (sched w/ Teresa)

A LIST OF PARTICIPATING STUDENTS MUST BE ATTACHED

Library fines must be paid before a student can participate in school-sponsored activities such as field trips and dances. Sponsors should provide a list of intended participants to the media specialist two weeks prior to the event so students have time to meet their library obligations. Sponsors should then verify with the media specialist that the student has met the obligations. This includes class trips, Homecoming parade, graduation events, and dances that are sponsored by the school. (Note: This does not include events that are required for course participation, such as band competitions.)

For items to be purchased for the above function, a purchase order must be obtained from the Bookkeeper and approved by the Principal **PRIOR** to ordering. ALL FUNDS must be turned into the bookkeeper for deposit on the day collected. (If this is an evening event, all funds must be placed in the bank night deposit – see bookkeeper for arrangements)

If an evening event is planned, you must complete the following: (1) Arrange for building/location/air conditioning with Regina Ryan. (2) Arrange for chaperones and/or deputy. (3) Arrange for custodial services if needed. (4) Names of sponsors/teachers/ chaperones must be filed with this request.

Randi Sokolosky, Sponsor Signature 02/07/19, Date

_____, President of Club _____, Date

BLPT Meeting Date _____ Principal Approval [Signature] Date 2/19/19

Request Denied /More Information Needed _____

Once approval is granted the sponsor must complete the following:

1. If the auditorium, media center, or field will be used make sure to plan with Joe, Kathy, or Teresa. Magic does not happen unless you (the sponsor) organize it.
2. At least three (3) days prior sponsor must have students get teacher approval to miss class to attend field trip.
3. One (1) day prior to event/activity school sponsor is to send out list of involved students to staff via email.

Office Use: Sponsors, Chaperones, Teachers on File? **Yes/No** Not more than 2 teachers may be out of class per event.



Request for Leave

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RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name **OMAIRA URBAY**

School/Department **ADULT EDUCATION**

Position **REGISTRAR**

Requested Dates	
From:	Time
04/23/2019	8:00 pm
To:	Time
04/24/2019	5:00 pm
No. of Days: 2	

Type of Leave Requested

☐ VACATION

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting



TEMPORARY DUTY ELSEWHERE: Nature of meeting

WEDDAC

Location:

TALLAHASSEE

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee Signature: **omaira.urbay@keysschools.com**

Digitally signed by
omaira.urbay@keysschools.com
DN: cn=omaira.urbay@keysschools.com
Date: 2019.03.25 11:13:58 -04'00'

Date:

Approved: **Trevor Tyler**

Digitally signed by Trevor Tyler
DN: cn=Trevor Tyler, o=Monroe County School District,
ou=Adult Education,
email=trevor.tyler@keysschools.com, c=US
Date: 2019.03.25 12:06:13 -04'00'

Date:

Not
Approved:

Date:

Leave
Granted:

Date:

Not
Granted:

Date:



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name **ALLY VU**

School/Department **ADULT EDUCATION**

Position **OFFICE MANAGER**

Requested Dates	
From:	Time
04/23/2019	8:00 am
To:	Time
04/24/2019	5:00 pm
No. of Days: 2	

Type of Leave Requested

☐ VACATION

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

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ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting



TEMPORARY DUTY ELSEWHERE: Nature of meeting

WEDDAC

Location:

Tallahassee

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

Ally Vu

Digitally signed by Ally Vu
DN: cn=Ally Vu, o=Monroe County School District,
ou=Adult Education, email=Ally.Vu@KeysSchools.com,
c=US
Date: 2019.03.25 10:24:06 -04'00'

Date:

Approved:

Trevor Tyler

Digitally signed by Trevor Tyler
DN: cn=Trevor Tyler, o=Monroe County School District,
ou=Adult Education,
email=trevor.tyler@keysschools.com, c=US
Date: 2019.03.25 12:05:28 -04'00'

Date:

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:

Workforce Education District Data Advisory Council (WEDDAC)

Lively Technical College, 500 N. Appleyard Drive, Tallahassee, FL 32304

www.livelytech.com

Draft Agenda

April 23-24, 2019

April 22, 2019 WEDDAC Steering Committee Meeting

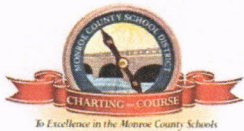
- 5:30 p.m. – Holiday Inn and Suites-Tallahassee East Capitol-University, Room TBD

April 23, 2019 FDOE Presentations 08:30 – 05:00 p.m.

- 08:30 – 08:45 WEDDAC - Welcome/Sign-In/Introductions
- 08:45 – 09:30 DOE Update 1 (Budget Updates)
- 09:30 – 10:30 DOE Update 2 (Federal Updates)
- 10:30 – 10:45 BREAK
- 10:45 – 11:30 DOE Update 3 (Reporting Changes & Updates)
- 11:30 – 12:15 DOE Update 4 (Data Quality and Reporting)
- 12:15 – 01:45 LUNCH on your own
- 01:45 – 02:45 DOE Update 5 (DQ2 Update)
- 02:45 – 03:15 DOE Update 6
- 03:15 – 03:30 BREAK
- 03:30 – 04:30 Open Group Discussion/Topics Presented by Districts
- 04:30 – 05:00 DOE Update 7 (Secondary CTE)
- 05:00 – Adjournment

April 24, 2019 Steering Committee / District Presentations 08:30 – 12:00 p.m.

- 08:30 – 08:45 WEDDAC - Welcome/Sign-In
- 08:45 – 10:30 DOE Additional Presenters TBD
- 10:30 – 10:45 BREAK
- 10:45 – 11:45 Discussion and Best Practices by Steering Committee / Districts
- 11:45 – 12:00 WEDDAC Business



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name **Sarah Adams Morton**

School/Department **Teaching and Learning**

Position **Language Arts Supervisor**

Requested Dates	
From:	Time
04/24/2019	11:00 am
To:	Time
04/26/2019	6:00 pm
No. of Days: 3	

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

Related to Injury-In Line of Duty

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

Council of Language Arts Supervisors' Conferen

Orlando, FL

Travel charged to:

FUND
0110

FUNCTION
6400

OBJECT
330

CENTER
0130

PROJECT
7004

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee **sarah.morton@keyssc**
Signature: **hools.com**

Digitally signed by
sarah.morton@keysschools.com
DN: cn=sarah.morton@keysschools.com
Date: 2019.03.20 16:33:02 -04'00'

Date: **03/20/2019**

Approved: 

Date: **4/2/2019**

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:

**Florida Council of Language Arts Supervisors
Spring 2019 Conference—April 25 & 26, 2019
The Rosen Plaza Hotel--Orlando, FL**

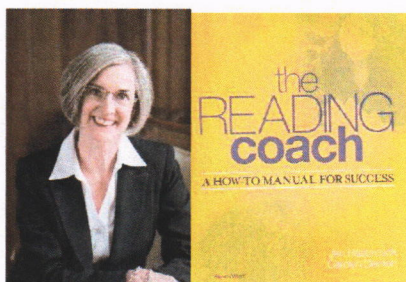
AGENDA

Thursday, April 25, 2019	
8:00AM	Registration and Networking Breakfast (sponsored by Pearson)
8:45AM	Welcome and Introductions
9:00AM	Featured Speaker: (sponsored by Pearson)
10:30AM	Morning Break: Cover Me in Chocolate (sponsored by Benchmark Education)
10:45AM	Keynote Speaker: Dr. Jan Hasbrouck (sponsored by Benchmark Education)
12:15PM	<i>Lunch On Your Own</i>
1:30PM	Featured Speaker: Jennifer Serravallo (sponsored by Houghton Mifflin Harcourt)
3:00PM	Afternoon Break: The Cookie Jar (sponsored by No Red Ink)
3:15PM	Presentation: Sally Rhodes, FLDOE
4:15PM	Session Closing
4:30PM	<i>Adjourned—Dinner On Your Own</i>

Friday, April 26, 2019

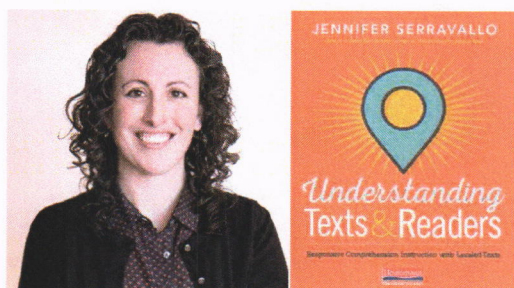
8:00AM	Registration and Networking Breakfast (sponsored by Houghton Mifflin Harcourt)
8:45AM	CLAS Announcements
9:00AM	Presentation: Kristie Ryan, CPALMS
10:30AM	Morning Break: Down to Size! (sponsored by Sadlier)
10:45AM	Featured Speaker: Dr. Daniel Willingham (sponsored by Amplify)
12:15PM	Presentation: Vince Verges, FLDOE
1:15PM	Afternoon Break: The Cookie Jar (sponsored by Amplify)
1:30PM	Session Closing/CLAS Conversation
2:00PM	Adjourned

Confirmed Speakers



Dr. Jan Hasbrouck

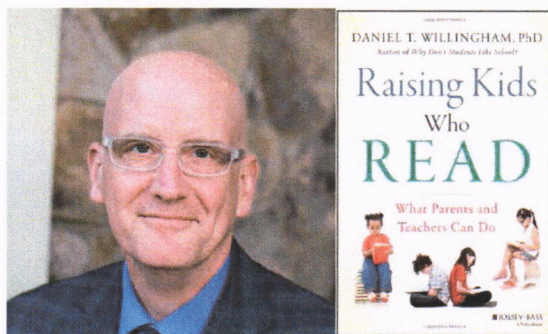
Jan Hasbrouck, Ph.D., is a leading educational consultant, trainer, and researcher. Dr. Jan Hasbrouck worked as a reading specialist and coach for 15 years before becoming teaching at the University of Oregon and later at Texas A&M University. She served as the Executive Consultant to the Washington State Reading Initiative. Dr. Jan Hasbrouck works with educators across the United States as well as internationally, helping teachers, administrators, and specialists design and implement effective assessment and instructional programs targeted to help low-performing readers. Dr. Jan Hasbrouck earned her B.A. and M.A. from the University of Oregon, and her Ph.D. from Texas A&M University. Her research in areas of reading fluency, reading assessment, coaching and consultation, and second language learners has been published in numerous professional books and journals. She is the author and coauthor of several books, including training manuals and administrator guides for GHA to support professional development and help educators change practices in schools.



Jennifer Serravallo

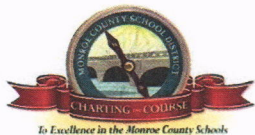
Jennifer Serravallo is the author of New York Times bestseller *The Reading Strategies Book* as well as other popular Heinemann Professional Books, *The*

Writing Strategies Book; Teaching Reading in Small Groups; Conferencing with Readers; and The Literacy Teacher's Playbook, Grades K - 2 and Grades 3 - 6. Her newest book is Understanding Texts & Readers , and in January of 2019, A Teacher's Guide to Reading Conferences will become available as part of the Classroom Essentials series. Jen began her career in education as a teacher in Title I schools in NYC and later joined the Teachers College Reading and Writing Project at Columbia University. Through TCRWP, and now as an independent consultant, she has spent over a decade helping teachers across the country to create literacy classrooms where students are joyfully engaged and the instruction is meaningfully individualized to students' goals. Jen holds a BA from Vassar College and an MA from Teachers College, where she has also taught graduate and undergraduate classes on urban education reform and children's literature.



Daniel Willingham

Daniel Willingham is professor of psychology at the University of Virginia. His bestselling first book, "Why Don't Students Like School?" (Jossey-Bass, 2009), was hailed as "a triumph" by The Washington Post and "brilliant analysis" by The Wall Street Journal, recommended by scores of magazines and blogs, and translated into many languages. His most recent book, "When Can You Trust the Experts?" (Jossey-Bass, 2012), was named recommended reading by Nature and Scientific American and made CHOICE's list of Outstanding Academic Titles for 2013. Willingham writes a regular column called "Ask the Cognitive Scientist" for the American Federation of Teachers' magazine, American Educator, and blogs frequently for RealClearEducation.com. He is a fellow of the American Psychological Association, and of the Association for Psychological Science.



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name *Theresa Axford*

School/Department *District*

Position *Ex. Dir. of
Teaching and Learning*

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

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☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting



TEMPORARY DUTY ELSEWHERE: Nature of meeting

*Making Wellness a
Priority sponsored by DOE*

Location: *Orlando*

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

Theresa Axford

Date:

4/2/2019

Approved:

Date:

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name **Sarah Adams Morton**

School/Department **Teaching and Learning**

Position **Multi-tiered Systems of Support**

Requested Dates	
From:	Time
04/30/2019	12:00 pm
To:	Time
05/03/2019	7:00 pm
No. of Days: 4	

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

Related to Injury-In Line of Duty

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☐ TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

FDOE Leadership Panel: Mental Health

Orlando, FL 33050

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

7009

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee Signature: **sarah.morton@keysschools.com**

Digitally signed by
sarah.morton@keysschools.com
DN: cn=sarah.morton@keysschools.com
Date: 2019.03.29 13:17:01 -04'00'

Date: **03/29/2019**

Approved:

Date: **4/5/2019**

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County, I hereby request a Leave of Absence for the following period of time as indicated:

Name **Maryanne Nickel**

School/Department **District ESE**

Position **Behavior Specialist**

Requested Dates

From: **04/30/2019** Time **8:30 am**

To: **05/03/2019** Time **8:30 pm**

No. of Days: **4**

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

☐ ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting



TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

BEES/EBD Contact mtg. and Healthy Minds H

Orlando Fla.

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee Signature: **Maryanne Nickel, MS, BCaBA**

Digitally signed by Maryanne Nickel, MS, BCaBA
Date: 2019 03 27 10 31:43 -04'00'

Date: **03/27/2019**

Approved:

Not

Approved:

Leave

Granted:

Not

Granted:

Date:

Date:

Date:

Date:

4/5/2019

Diana Lorenz

From: Maryanne Nickel
Sent: Wednesday, March 27, 2019 10:53 AM
To: Diana Lorenz; Catherine Kanagy
Cc: Sarah Adams Morton
Subject: RE:
Attachments: HR011_MCSD_Request for Leave EBD contact mtg.pdf

Diana:

Attached is the TDE for this event. Sarah Morton, Terri Axford, and I will be attending and participating on a panel discussion of experts. Additionally I will be doing a presentation on 'Classroom Behavior Strategies of General Education Teachers to use with ESE students. I will scan all the additional pertinent info needed in a subsequent email.

Many thanks,
Mare

From: Diana Lorenz <Diana.Lorenz@KeysSchools.com>
Sent: Wednesday, March 27, 2019 10:10 AM
To: Maryanne Nickel <Maryanne.Nickel@KeysSchools.com>
Subject:

Diana Lorenz

Exceptional Student Education Office Manager
Monroe County School District
255 Crane Blvd.
Summerland Key, FL 33042
305-293-1400 ext 53378
Fax 305-745-2695
Email: Diana.Lorenz@keysschools.com



Learning Knows No Bounds



State Board of Education

Marva Johnson, *Chair*
Andy Tuck, *Vice Chair*
Members
Gary Chartrand
Ben Gibson
Tom Grady
Michael Olenick
Joe York

Pam Stewart
Commissioner of Education

MEMORANDUM

TO: School District Superintendents
FROM: Hershel Lyons
DATE: November 16, 2018

Contact Information:

Brooks Rumenik
Brooks.Rumenik@fldoe.org
850-245-0749

Penny Taylor
Penny.Taylor@fldoe.org
850-245-9522

DPS: 2018-169

SUBJECT: Social and Emotional Education and Skills Development Landscape in Florida

The Florida Department of Education's Offices of Safe Schools and Healthy Schools have forged a partnership to build a statewide foundation for safe and supportive school environments through a three-pronged approach to improve social and emotional education and skills development. Research shows that social and emotional education positively impacts academic achievement and significantly reduces conduct problems, emotional distress and drug use.

This three-pronged approach includes the following:

1. Facilitate a Florida Social Emotional Education District Collaborative to build statewide capacity.
2. Develop an interactive district implementation landscape map.
3. Strengthen social and emotional education and skills development through a best-practice track at the 2nd Annual Making Wellness a Priority: Healthy Minds & Healthy Futures Conference.

To build the landscape map, we need to gather district-level information about the implementation of social and emotional education and skills development programs, practices, strategies and initiatives. Please designate a staff member who oversees social and emotional education in your district to complete a brief four question [survey](#) by **December 7, 2018**, to help us begin developing the landscape map.

The 2nd Annual Making Wellness a Priority: Healthy Minds & Healthy Futures Conference is scheduled for May 1-3, 2019, at Omni Resort in ChampionsGate, Florida. The conference brings together national and local experts to share innovative and proven practical approaches in the area of transition of youth with mental health disabilities, specifically addressing employment, prevention, community engagement and systems of care. This year, there will be a specific track featuring Social and Emotional Education and Skills Development.

HERSHEL LYONS
CHANCELLOR OF PUBLIC SCHOOLS

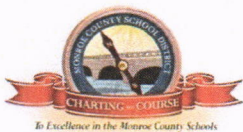
Social and Emotional Education and Skills Development Landscape in Florida
November 16, 2018
Page Two

If your district is interested in being considered as a potential workshop presenter, please complete the [Call for Presentations form](#) by **Friday, January 18, 2019**.

For more information, please contact Brooks Rumenik at Brooks.Rumenik@fldoe.org or Penny Taylor at Penny.Taylor@fldoe.org.

HL/br

cc: School Safety Specialist



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name **Melissa Alsobrooks**

School/Department **Teaching and Learning**

Position **Science Coordinator**

Requested Dates	
From:	Time
05/01/19	1:00pm
To:	Time
05/03/2019	12:00am
No. of Days: 3	

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

Related to Injury-In Line of Duty

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

Florida Healthy School Assoc. 2019 Conference

Orlando, Florida

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

Melissa Alsobrooks

Digitally signed by Melissa
Alsobrooks

Date: 2019.03.25 10:15:31 -04'00'

Date: **03/25/19**

Approved:

Date:

4/2/2019

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:

Florida School Health Association
Annual Conference and Training

May 1-3, 2019
Rosen Centre Hotel, Orlando

Draft AGENDA Overview
(subject to change)

Wednesday, May 1, 2019

Pre-Conferences:

8:30 -11:30 am	Recognizing Impairment and Substance Exposure Medical Marijuana Panel Presentation	Florida Dept of Education, Office of Safe Schools Clay Action Coalition Office of National Drug Control Policy Spencer Solutions Groups
----------------	--	--

General Session:

1:00 – 1:15	Welcome	Brenda Register, FSHA President
1:15 – 3:00	<u>State Updates :</u> <ul style="list-style-type: none">• Office of Safe Schools• Office of Healthy Schools• School Health Services	Brooks Rumenik, Director Zsena Zipperer, Health Ed Coord Amy Riggen, Administrator DOH
2:45 – 3:00	Break	
3:00 – 4:00	2019 Legislative Report	Missy Timmons FSHA Legislative Consultant
4:00 – 5:00	<u>Keynote:</u> The “Juul” You Don’t Want in Your Jewelry Box	Ron Davis Tobacco Program Supervisor Juli Davis Tobacco Free Florida Florida Department of Health

AGENDA (cont.)

Thursday, May 2, 2019

- **Breakout Sessions (25) from 8:00am – 4:00pm**

Topics include: Medical Errors, Laws & Rules, Human Trafficking, Type 1 Diabetes Technology Update, LGBTQ Awareness for School Staff and Administrators, Recovery Schools, Identifying Drug Trends and Drug Culture in Your School, Asthma, Domestic Violence, Effectiveness of Collaborations in a School-based Telehealth Program, Health and the Arts, Mental Health Illness in Schools, YRBS Florida Data Results, Heiken Children's Vision Program, E-Cigarette Prevention and more....

- **Annual Business Meeting and Awards Lunch 12:00 – 1:30pm**
- **FSHA Reception 5:00-6:00pm**
 - **Meet the Exhibitors! Raffle Items**
 - **Network with colleagues from around the state**

Friday, May 3, 2019

8:30- 9:30am	School Safety
9:30 – 10:30 am	Trauma and Addictions
10:30 – 10:45	Break
10:45- 11:45	A Health You
11:45 – 12:00pm	Closure



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name **Gary Hernandez**

School/Department **Key West High School**

Position **Band Director**

Requested Dates

From: 05/03/2019 Time 8:00 am

To: 05/05/2019 Time 6:00 pm

No. of Days: 3

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE ☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting



TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

Spring Band Trip to Miami/Tampa

Travel charged to:

FUND
NA

FUNCTION

OBJECT

CENTER
0101

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

Gary Hernandez

Digitally signed by Gary Hernandez
DN: cn=Gary Hernandez, o=Key West High
School, ou,
email=Gary.Hernandez@KeysSchools.com, c=US
Date: 2019.03.25 16:53:37 -04'00'

Date:

Approved:

Arthur Arceles

Date:

4-1-19

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:

Key West High School Band Spring Trip 2019

Rationale: Optional annual field trip for band students that includes attendance at exemplary music performances, theme park, and a college visit.

Destination: Miami/Tampa

Approximate cost per student: \$250 plus meals

Itinerary:

May 3

8:00am-Depart Key West High School

11:00am-Lunch, Tour, and attend State Concert MPA Performances at FIU

3:30pm-Depart FIU

7:30pm-Arrive at Tampa for Dinner

9:00pm-Depart for hotel

9:15pm-Arrive at TBD Hotel

May 4

9:00am-Depart Hotel for Bush Gardens

6:30pm-Depart Park

7:00pm-Dinner and Movie at International Plaza and Bay Street Mall

10:00pm-Return to Hotel

May 5

Return to Key West From Tampa

7:30am Departure

10:30am Rapids Water Park, Riviera Beach

1:30pm Depart for Key West

6:30pm Drop off at Key West High School



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Requested Dates	
From:	Time
May 5	11 ^{am}
To:	Time
May 7	5 ^{pm}
No. of Days: 3	

Name Marianne Nelson

School/Department

SLS

Position Teacher, gifted

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request form.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting

FL History Day

Location: Tallahassee

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee

Signature: Marianne Nelson

Date: 3/7/19

Approved: Harry Russell

Date: 3-9-19

Not

Approved:

Date:

Leave

Granted: D. Dennis Gifford

Date: 3/22/2019

Not

Granted:

Date:



Invitation to Judge

2019 FLORIDA HISTORY DAY

MONDAY, MAY 6



The Museum of Florida History invites you to serve as a judge at the Florida History Day state contest on Monday, May 6 at Tallahassee Community College. We welcome people with professional or academic experience in history, social studies, library science, media production, visual or graphic arts, theater, journalism, and communications. We also welcome avocational historians. Please visit floridahistoryday.com for information on this program. Judging opportunities include the categories and divisions listed below.

Categories:

Historical Paper, Documentary, Performance, Exhibit, Website, and Special Prize

Divisions:

Junior (grades 6–8) and Senior (grades 9–12)

To register to judge, go to
floridahistoryday.com/judgeinfo

If you are a veteran judge who will not be available this year, please let us know by email.

If you are not able to judge but still wish to help, we have a variety of volunteer opportunities available from Sunday to Tuesday, May 5–7, 2019. Contact us for information on how to sign up to volunteer.

We hope you can join us for another great Florida History Day state competition. Please share this invitation with others.

Contact us at:

Danila Coppola

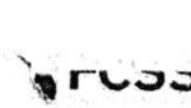
Florida History Day Co-Coordinator

850.245.6330; danila.coppola@dos.myflorida.com

Trampas Alderman

Florida History Day Coordinator

850.245.6326; trampas.alderman@dos.myflorida.com





Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name

School/Department

Position

Requested Dates	
From:	Time
To:	Time
No. of Days:	

Type of Leave Requested

VACATION

SICK LEAVE

Related to Injury-In Line of Duty

PERSONAL LEAVE

*With Pay

Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

JURY DUTY

MILITARY LEAVE

FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee

Signature:

Date:

Approved:

Date:

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:

FLORIDA EDUCATIONAL NEGOTIATORS

39th Annual Spring Training Program

Always FENtastic!

Embassy Suites by Hilton Orlando –Lake Buena Vista South
4955 Kyngs Heath Road
Kissimmee, Florida 34746
May 7 - 9, 2019

Tuesday, May 7, 2019

12:00 p.m. – 4:00 p.m.	Conference Registration	West Registration Desk
2:00 – 2:15 p.m.	Welcome	Palms, E, F & G
	Speakers: John Boyd, F.E.N. President Osceola County Public Schools	
	Dr. Debra Pace, Superintendent Osceola County Public Schools	
2:15 – 3:15 p.m.	General Session 1	Palms, E, F & G
3:15 – 3:30 p.m.	Annual Business Meeting Election of 2019-2020 Officers John Boyd, F.E.N. President	Palms, E, F & G
3:30 – 5:00 p.m.	General Session 2	Palms, E, F & G
6:00 – 8:00 p.m.	Board of Directors Meeting	Discovery Boardroom

Enjoy an Evening on Your Own:

Network with Fellow FEN Members

Wednesday, May 8, 2019

7:30 – 1:00 p.m.	Conference Registration	West Registration Desk
7:45 – 9:00 a.m.	Continental Breakfast	Palms Foyer
8:30 – 9:30 a.m.	General Session 3	Palms, E, F & G
9:30 - 9:45 a.m.	Break	
9:45 – 10:45 a.m.	Concurrent Session 1 (Select One)	
11:00 – 12:00 p.m.	Concurrent Session 2 (Select One)	
12:00 – 1:15 p.m.	Lunch on Your Own	
1:15 – 2:15 p.m.	Concurrent Session 3 (Select One)	
2:15 – 2:30 p.m.	Break	Gold Coast Foyer
2:30 – 3:30 p.m.	Concurrent Session 4 (Select One)	
3:45 – 4:45 p.m.	General Session 4	Palms, E, F & G
5:30 – 7:00 p.m.	Reception	Key West Terrace

Thursday, May 9, 2019

8:00 – 9:30 a.m.	Conference Registration	West Registration Desk
8:00 – 9:00 a.m.	Continental Breakfast	Palms Foyer
8:15 – 9:15 a.m.	General Session 5	Palms E, F & G

9:15 – 10:15 a.m.	General Session 6	Palms E, F & G
10:15 – 10:30 a.m.	Break	Palms Foyer
10:30 – 11:45 p.m.	General Session 7	Palms, E, F & G
11:45 – 1:00 p.m.	Conference Luncheon (Buffet)	Room
1:00 - 2:30 p.m.	General Session 8	Palms E, F & G

The 2019 Florida Legislature: An Interim Report

Ruth Melton, Director of Advocacy Services,
Florida School Boards Association
And Members of the Florida Education Legislative
Liaisons

2:30 – 2:45 p.m.	Break	Palms Foyer
2:45 – 3:15	General Session 8 Continued	
3:15 – 3:30 p.m.	Closing Comments Cathy Weber, F.E.N. President St. Johns County Public Schools	



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name **Suanne Lee**

School/Department **Internal Services**

Position **Director**

Requested Dates	
From:	Time
5/13/2018	8:00 am
To:	Time
5/16/2018	5:00 pm
No. of Days: 4	

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting
FAPPO MTG- FL Assoc Public Procurement Officials

Location:
Ft Lauderdale, FL

Travel charged to:	FUND 0110	FUNCTION 7760	OBJECT 0310	CENTER 9281	PROJECT 0001
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In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

Suanne Lee

Digitally signed by Suanne Lee
DN: cn=Suanne Lee, o=Monroe County School District,
ou=Director of Internal Services,
email=suanne.lee@keysschools.com, c=US
Date: 2019.02.08 13:22:37 -05'00'

Date:

Approved:

Jim Drake

Digitally signed by Jim Drake
DN: cn=Jim Drake, o=Monroe County Schools,
ou=Finance, email=james.drake@keysschools.com,
c=US
Date: 2019.02.21 12:29:41 -05'00'

Date:

Not
Approved:

Date:

Leave
Granted:

Date:

Not
Granted:

Date:



Annual Conference

52nd Annual Conference and Trade Show

Striving for Excellence

May 13 – 16, 2019

Conference and Host Hotel

Hilton Fort Lauderdale Marina

1881 SE 17th Street

Fort Lauderdale, FL 33316

Trade Show May 14, 2019

Greater Ft. Lauderdale/Broward County Convention Center

1950 Eisenhower Blvd.

Ft. Lauderdale, FL 33316

Check back for updates!

Copyright 2019



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name **Gary Hernandez**

School/Department **Key West High School**

Position **Band Director**

Requested Dates	
From:	Time
5/16/2019	1:40 pm
To:	Time
5/18/2019	2:00 pm
No. of Days: 1.2	

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

State Meetings: FBA/FMSA Associations

Daytona, FL

Travel charged to:	FUND	FUNCTION	OBJECT	CENTER	PROJECT
	0110	5100	0330	9015	7051

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee Signature: **Gary Hernandez**

Digitally signed by Gary Hernandez
DN: cn=Gary Hernandez, o=Key West
High School, ou,
email=Gary.Hernandez@KeysSchools.c
om, c=US
Date: 2019.03.25 14:34:07 -0400

Date:

Approved:

Amber Sue...

Date:

4-1-19

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:

Florida Music Supervision Association
Spring Meeting
May 17, 2019
Hilton Daytona Beach.

9:00-9:30 Introductions

- a. Name, Title, Scope of Work
- b. Best work-related news of the year!

9:30-10:30 Florida All-State Demographics Data Project Results

- a. What does the data tell us?
- b. How do we expand our reach?
- c. What is next?

10:30-11:00 Updates from Headquarters

- a. NAFME
- b. FMEA

11:00am-11:45 Collegiate Session Planning/Revision

- a. Brain Dump
- b. Discussion
- c. Redesign
- d. Proposal

12:00 – 1:00pm Lunch (Sponsored by Group Travel Network)

1:00-1:30pm Advocacy

- a. Current Issues
- b. What to watch for

1:30 – 2:45pm Title I

- a. Challenges
- b. Best Practices
- c. Closing the Achievement Gap
- d. Retaining Teachers

2:45 - 3:00 Open Forum



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name **Michael Skrodinsky**

School/Department **Facilities/Maintenance**

Position **Maintenance Supervisor**

Requested Dates	
From:	Time
05/21/2019	7:00 am
To:	Time
05/22/2019	5:00 pm
No. of Days: 2	

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting



TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

Managing Keying Systems

Miami, FL.

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee Digitally signed by michael.skrodinsky@keysschools.com

Signature: Date: 2019.04.01 07:33:48 -04'00'

Date: 04/01/2019

Approved:

Jeff Barrow

Digitally signed by Jeff Barrow
Date: 2019.04.01 09:50:30 -04'00'

Date: 04/01/2019

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:

Allegion invites you
to attend a class
on:

Schlage Cylinder Servicing

CY101

Are pinning cylinders or managing key systems now part of your job? In this highly interactive class on the features, operation, & servicing of Schlage full size cylinders, you will work with Primus & Everest cylinders to learn fundamental locksmithing techniques. While Schlage's innovative modular cylinders are used in this class, the techniques apply to most pin tumbler cylinders.

Course Length: 1 day

Topics Include:

- Standard industry terms and tools
- Schlage Primus & Everest full size cylinders including full size interchange cores (small Format interchangeable cores are not covered in this class)
- Cylinder shimming, disassembly, assembly, pinning, and rekeying procedures
- Pinning calculations, applying MACS and reading bitting lists
- Maintenance, troubleshooting and servicing tips

Upon Completion Of This Course, You Will Be Able To:

- Use proper terminology when discussing cylinders & keys
- Shim conventional pin tumbler cylinders as a service technique
- Disassemble & reassemble Schlage Primus & Everest cylinders
- Load springs, top pins, bottom pins and Primus finger pins
- Rekey Schlage full size Everest & Primus cylinders
- Calculate cylinder pinning and recognize unusable combinations
- Interpret bitting lists to pin master keyed cylinders
- Read Primus side bitting and finger pins
- Properly service and maintain cylinders, and identify and repair cylinder malfunctions

Who Should Attend:

Institutional and commercial locksmiths, personnel responsible for pinning cylinders and managing master key systems, facility managers and distributors

Continuing Education Credit: 1 point toward maintaining your ALOA certified status

Tuesday, May 21, 2019

Miami Dade College – Kendall
Campus Room 9119
11011 SW 104th St
Miami, FL 33176

Class Start/End Times:
8:30 am – 4:30 pm

Allegion Contact:

Luis Prieto
luis.prieto@allegion.com
786-779-1032

To REGISTER, please go to:

www.allegiontraining.com

In the search box on that screen,
type the course number: **CY101**

To ensure a positive experience for all participants, we limit our class sizes. We encourage early registration whenever possible, as some classes fill up fast.

If you have any questions, or if the class is full and you would like to be added to the wait list, call the contact listed above.

Allegion invites you
to attend a class
on:

Basic Masterkeying

MK101

Take this class to take the mystery out of master keying. Learn master key terminology, how master key systems work, and how they are designed, documented, and utilized. Complete multiple written exercises to practice using the standard key coding system, key biting arrays, and keying schematics. Take home helpful reference documents, too, including the ALOA Professional Locksmith Dictionary.

****This class does not include hands-on cylinder pinning****

Course Length: 1 day

Topics Include:

- The theory behind master key systems
- Levels of keying, key schematics, key symbols & the standard key coding system
- Pinning calculations, applying the MACS, and reading factory biting lists
- Site surveys and building code considerations
- Key conferences

Upon Completion Of This Course, You Will Be Able To:

- Use proper master keying terminology
- Apply standard key coding key symbols to 2 and 3 level MK systems
- Explain the disadvantages of cross keying
- Interpret biting lists and calculate cylinder pinning
- Design a simple one page master key system using a key biting array
- Reverse engineer small level master key systems
- Plan for a site survey and a key conference using best practices

Who Should Attend: Institutional and commercial locksmiths, personnel responsible for pinning cylinders and managing masterkey systems, facility managers, distributors

Prerequisite: Experience in pinning cylinders or completion of the CY101 Schlage Cylinder Servicing class.

Continuing Education Credit: 1 point toward maintaining your ALOA certified status

Wednesday, May 22, 2019

Miami Dade College – Kendall
Campus Room 9119
11011 SW 104th St
Miami, FL 33176

Class Start/End Times:
8:30 am – 4:30 pm

Allegion Contact:

Luis Prieto
luis.prieto@allegion.com
786-779-1032

To REGISTER, please go to:
www.allegiontraining.com

In the search box on that screen,
type the course number: **MK101**

To ensure a positive experience for all participants, we limit our class sizes. We encourage early registration whenever possible, as some classes fill up fast.

If you have any questions, or if the class is full and you would like to be added to the wait list, call the contact listed above.



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Requested Dates	
From:	Time
05/22/2019	8:00 am
To:	Time
05/24/2019	12:00 pm
No. of Days: 2.5	

Name **Kristen Condella**

School/Department **Teaching and Learning**

Position **Instructional Materials**

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting



TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

FADIMA COST ANALYSIS

TAMPA, FL

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

9015

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee

Signature:

Kristen Condella

Digitally signed by Kristen Condella

Date: 2019.03.21 12:00:41 -04'00'

Date: **03/21/2019**

Approved:

Cherise Ayers

Date: **3/2/2019**

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:

Date:



COST ANALYSIS 2019

AGENDA

Wednesday, May 22, 2019

4:30 pm	Board Meeting
	Committee Meetings
	"Hot Topics" Brainstorming

Thursday, May 23, 2019

8:30 am	Welcome
9:00 am	Legislative Update
10:00 am	DOE Update
10:30 am	FSBD Update
11:00 am	Cost Analysis
Noon	Lunch
1:00 pm	Cost Analysis
3:30 pm	Group Presentations
4:30 pm	Wrap up/Closure
5:30 pm	Dinner

Friday, May 24, 2019

8:30 am	Cost Analysis
11:30 am	Lunch

FADIMA

www.FADIMA.net
info@FADIMA.net

Dr. Loretta Faith Harris
President
Lake County

Kimberly Clark-Dixon
Vice President
St. Johns County

Kristen Condella
Secretary
Monroe County

Licki Cornman
Treasurer
Palm Beach County

Debbie Moffitt
Director
Sumter County

Daniela Mitchell
Director
Orange County

Corrie Cosgrove
Director
St. Johns County

Sandy Lewis
Director
VEFEC

Julie Lorenzo
Director
Collier County



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name Douglas Bickings

School/Department KWHS

Position Teacher

Requested Dates

From: 06/02/2019 Time 10:00 am

To: 06/07/2019 Time 3:00 pm

No. of Days: 5

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

FADA Automotive Instructors Summer Training \

Orlando, Florida

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee Signature:

[Signature]

Date:

Approved:

[Signature]

Date:

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name **Jorge Bosque**School/Department **CSHS**Position **Teacher**

Requested Dates	
From:	Time
06/02/2019	10:00 am
To:	Time
06/07/2019	3:00 pm
No. of Days: 5	

Type of Leave Requested

☐ VACATION☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE☐ *With Pay☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to: **ILLNESS**

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ INJURY in the line of Duty☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

FADA Automotive Instructors Summer Training \

Orlando, Florida

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

Date:

2/28/19

Approved:

Date:

2/28/19

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:



**Florida Automobile Dealers Association Presents
The 16th Annual Florida Automotive Instructors Summer Training Workshop**

WORKSHOP AGENDA - June 3-7, 2019

Monday, June 3

7:00 - 7:45 am - Registration – Auto shop entrance, Mid Florida Campus, building 400
8:00 - 8:30 am - Welcome and Overview - Breakfast - *sponsored by: Snap-on Tools and Central Florida Auto Dealers Assn.*
8:30 - 10:00 am Class
10:00 - 10:15 am Break
10:15 - 11:45 am Class
11:45 - 12:30 pm Lunch - *Sponsored by: FCA Chrysler, Learning Labs/ATech and Electude*
12:30 - 2:00 pm Class
2:00 - 2:15 pm Break
2:15 - 3:45 pm Class

Tuesday, June 4

7:00 - 8:30 am **Special Presentation – Ted Norman, Florida DOE**
8:30 - 10:00 am Class
10:00 - 10:15 am Break
10:15 - 11:45 am Class
11:45 - 12:30 pm Lunch - *Sponsored by: Gates Corporation, BMW and Hunter Engineering*
12:30 - 2:00 pm Class
2:00 - 2:15 pm Break
2:15 - 3:45 pm Class

Wednesday, June 5

7:00 - 8:30 am **Special Presentation – The ASE Education Foundation**
8:30 - 10:00 am Class
10:00 - 10:15 am Break
10:15 - 11:45 am Class
11:45 - 12:30 pm Lunch - *Sponsored by: ConsuLab, Honda Motors, and ASE*
12:30 - 2:00 pm Class
2:00 - 2:15 pm Break
2:15 - 3:45 pm Class

Thursday, June 6

7:00 - 8:30 am **Special Presentation – Working with today's youth—providing well-structured, hands-on training**
8:30 - 10:00 am Class
10:00 - 10:15 am Break
10:15 - 11:45 am Class
11:45 - 12:30 pm Lunch - *Sponsored by: Ford Motor Company, Matco Tools, and Goodheart Willcox*
12:30 - 2:00 pm Class
2:00 - 2:15 pm Break
2:15 - 3:45 pm Class

Evening

4:00 – 7:30 pm Trade Show & Raffle - *Dinner Sponsored by: CDX, ProCut, Southeast Toyota and Snap Auto*

Friday, June 7

9:00 – 11:00 am – CDX – Hands-On Computer Training on the NEW CDX Objective-Based Online and NATEF Tracking Program





Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name Timothy Hawkins

School/Department Transportation

Position Mechanic Helper

Requested Dates	
From:	Time
06/09/2019	8:00 am
To:	Time
06/13/2019	9:00 pm
No. of Days: 4	

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

Annual Bus Technicians Summer Workshops

Daytona Beach, FL

Travel charged to:

FUND
0110

FUNCTION
7800

OBJECT
330

CENTER
9122

PROJECT
0001

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature: *Tim Hawkins*

Date: 3/21/19

Approved:

Date:

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name Samuel Ovalle

School/Department Transportation

Position Mechanic

Requested Dates

From: 06/09/2019 Time 8:00 am

To: 06/13/2019 Time 9:00 pm

No. of Days: 4

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:
A Doctor's statement is required for any extended sick leave that exceeds 30 days

ILLNESS

☐ INJURY in the line of Duty

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting



TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

Annual Bus Technicians Summer Workshops

Daytona Beach, FL

Travel charged to:

FUND
0110

FUNCTION
7800

OBJECT
330

CENTER
9122

PROJECT
0001

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

Samuel Ovalle

Date:

3-29-19

Approved:

Date:

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name **Thomas Salazar**

School/Department **Transportation**

Position **Mechanic**

Requested Dates	
From:	Time
06/09/2019	8:00 am
To:	Time
06/13/2019	9:00 pm
No. of Days: 4	

Type of Leave Requested

- ☐ VACATION
- ☐ PERSONAL LEAVE ☐ *With Pay ☐ Without Pay
*(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)*
- ☐ JURY DUTY ☐ MILITARY LEAVE ☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting



TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

Annual Bus Technicians Summer Workshops

Daytona Beach, FL

Travel charged to:

FUND
0110

FUNCTION
7800

OBJECT
330

CENTER
9122

PROJECT
0001

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

Thomas Salazar

Date:

6/9/19

Approved:

Date:

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:



Florida Association for Pupil Transportation

EXECUTIVE COMMITTEE 2018-19 OFFICERS

Arby Creach, President
c/o Osceola District Schools
Arby.Creach@osceolaschools.net
(407) 518-4550

Jim Beekman, President-Elect
c/o Hillsborough District Schools
James.Beekman@sdhc.k12.fl.us
(813) 982-5570

Scott Pfender, Past President
c/o Lake District Schools
PfenderE@lake.k12.fl.us
(352) 536-8078

Region I (South) Director
Kayleen Watts
c/o Martin District Schools
Wattsk@martin.k12.fl.us
(772) 219-1287 ext 101

Region II (West Central) Director
Rick McBride
c/o Pinellas County Schools
mcbrideja@pcsb.org
(727) 547-7294

Region III (Central) Director
Bill Wen
c/o Orange County Public Schools
william.wen@ocps.net
(407) 317-3810

Region IV (N. Central, N. East) Director
Johnnie Jacobs
c/o Baker District Schools
Johnnie.Jacobs@bakerc12.org
(904) 259-2444

Region V (Panhandle) Director
Jay McInnis
c/o Okaloosa District Schools
mcinnisj@okaloosaschools.com
(850) 833-4161

Robert Manspeaker, DOE
Representative
School Transportation Management
c/o FL Department of Education
Robert.manspeaker@fldoe.org
(850) 245-9928

Don Ross, Vendor Representative
c/o FTS – Blue Bird
don.ross@fts4buses.com
(941) 209-0409 Mobile

Louise Piper, Executive Director
ExecDir@faptflorida.org
(772) 370-8260 Mobile
www.FAPTFlorida.org

February 14, 2019

MEMORANDUM

TO: Transportation Directors and Service Managers

FROM: Mike Frazee - Volusia District Schools
Tom Simco – Charlotte District Schools
Committee Co-Chairmen
FAPT Technicians Qualification and Standards Committee

CONTACT: Glen Enstice
Brevard District Schools
Phone: 321-302-9075
Email at Enstice.glen@brevardschools.org

SUBJECT: 30th Annual School Bus Technicians Summer Workshops

The Technicians Qualification and Standards Committee of the Florida Association for Pupil Transportation (FAPT), in conjunction with Volusia District Schools, has completed plans for the 30th Annual School Bus Technicians Summer Workshop. The workshop will provide school bus diagnostic and repair training both in classroom and hands-on settings.

The workshop dates are June 10-13, 2019, in Daytona Beach. A new class for the new technician will be offered (limited to 30 technicians) on Monday from 9am to noon. This class is a Bus Maintenance 101 and will cover topics such as diagnostics and electrical for the new tech. Regular classes begin on Monday at noon and end on Thursday at noon. On Tuesday and Wednesday classes will start at 7 am and continue until 6 pm.

Class reservations are secured by completing the following on-line registration form on a **first come, first serve basis**. [Technicians Summer Workshop On-Line Registration Form](#) A registration confirmation packet including all pertinent information will be emailed four (4) weeks prior to the workshop.

COST: \$150.00 per person which includes tuition, registration fees, supplies, and some meals (does not include lodging). Late registration is \$200.00 per person as of April 16. Registrations will not be accepted after May 1, 2019.

REGISTRATION DEADLINE: April 15, 2019. Late registration April 16-May 1, 2019.

All payment information will be provided with an invoice when registration is received.

Florida Association for Pupil Transportation
PO Box 1248
New Smyrna Beach, FL 32170
(407) GRO-FAPT (476-3278)



Florida Association for Pupil Transportation

Because we must guarantee student count, there are NO refunds for cancellations; however, substitutions can be made prior to the start of the workshop.

Choose from the following for each participant:

Monday Morning Optional Class for New Technicians:

- Yes
- No

Monday Afternoon Class Options:

Note: All technicians must register for one.

- Meritor
- Braun Lift
- Ricon Lift
- NAPA

Cummins Class Option:

Note: Cummins training will be offered to a maximum of 8 technicians and no two will be from the same district. The instruction is limited to school bus engines ONLY and NO training will be provided on white fleet trucks for Dodge/Chrysler/Fiat vehicles. A technician who is registered for Cummins will remain in this class from Tuesday morning until the workshop ends on Thursday at noon. Priority will be given to districts that did not have a technician attending the Cummins Class in 2018.

Tuesday Class Options

Each technician must register for a morning and an afternoon class. If Allison is selected, the technician will remain in this class all day. All other classes are one half-day only and two different classes must be selected.

- MCC Air – 5 hour Class
- ACC Air – 5 Hour Class
- RAC Air – 5 Hour Class
- TransAir – 5 Hour Class
- Allison – 10 Hour Class

OEM Classes on Wednesday and Thursday

Each technician who is not in the Cummins class must register for one of the following OEM Classes and will remain in this class all day Wednesday and until the workshop is over on Thursday.

- BlueBird
- IC
- Thomas

FAPT Testing: VST, MRT, or PST (participants and walk ins)

Florida Association for Pupil Transportation
PO Box 1248
New Smyrna Beach, FL 32170
(407) GRO-FAPT (476-3278)



Florida Association for Pupil Transportation

FAPT Vehicle Service Technician (VST), Master Repair Technician (MRT), and Parts Specialist (PST) certification tests will be given on Monday and Tuesday evenings. Persons registered for the workshop must also complete an on-line registration form if they wish to take VST, MRT or PST test(s). Tests are \$15 and will be conducted on Tuesday June 11, 2019 at 4 pm. Workshop participants and walk-ins must register using the [MRT, VST, PST Test Registration](#). All retests are also \$15.00 per test *Payment must be received prior to testing.*

Hands-On Safety Inspector Testing

Additionally, Florida School Bus Safety Inspector Certification **hands-on testing** will be available. Registration is required by using the on-line registration form at the following link. [Hands-on Safety Inspector Testing](#). *Payment of \$50 must be received prior to testing.*

We encourage you to take advantage of this training opportunity and thank you for your continued interest and support. Remember, there is scholarship funds available which has been previously posted on the FAPT website. Please feel free to contact any committee member if you have any questions or suggestions.

NOTE: Each district will be responsible for the lodging of their participants.

Recommended accommodations are listed below, please mention FAPT to receive discounted rate of \$75.65 per night including breakfast. Please send in tax exempt form to hotel.

Best Western Plus International Speedway
2620 International Speedway, Daytona Beach, Fl. 32114
PHONE: 386-258-6333 FAX 386-254-3698
bwdaytonaspeedway.com

Florida Association for Pupil Transportation
PO Box 1248
New Smyrna Beach, FL 32170
(407) GRO-FAPT (476-3278)



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name **Mark Porter**

School/Department **Administration**

Position **Superintendent**

Requested Dates	
From:	Time
06/12/2019	
To:	Time
06/14/2019	
No. of Days: 3	

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting



TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

FSBA/FADSS Summer Conference

Tampa, FL

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee

Signature:

Date: **04/03/2019**

Approved:

Date:

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name **Sue Woltanski**

School/Department **School Board**

Position **Board Member**

Requested Dates	
From:	Time
06/12/2019	
To:	Time
06/14/2019	
No. of Days: 3	

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting



TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

FSBA/FADSS Summer Conference

Tampa, FL

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

Date: **04/03/2019**

Approved:

Date:

Not
Approved:

Date:

Leave
Granted:

Date:

Not
Granted:

Date:



Wednesday, June 12, 2019
FSBA/FADSS Annual Summer Conference - TENTATIVE AGENDA

FSBA/FADSS Annual Summer Conference
June 12-14, 2019
Grand Hyatt Tampa Bay
Tampa, Florida

WEDNESDAY, JUNE 12, 2019 - TENTATIVE AGENDA

8:00 a.m. - 5:00 p.m. Conference Registration - Audubon Foyer (1st Floor)

7:30 - 9:00 a.m. FSBA Executive Officers' Breakfast and Meeting - President's Suite

9:00 - 9:30 a.m. Finance Committee Meeting

9:30 - 10:30 a.m. Leadership Services Committee Meeting

10:30 a.m. - 12:00 noon Legislative Committee Meeting

11:30 a.m. - 1:00 p.m. FEITF Meeting

12:00 noon - 1:00 p.m. Lunch on your own

1:15 - 3:15 p.m. Committee Meeting

3:30 - 5:00 p.m. FSBA Board of Directors' Meeting

THURSDAY, JUNE 13, 2019 - TENTATIVE AGENDA

7:00 a.m. - 5:00 p.m. Conference Registration - Audubon Foyer (1st Floor)

7:30 - 8:30 a.m. Continental Breakfast - Audubon Foyer (1st Floor)

7:30 - 8:30 a.m. Breakfast Meetings - FSLRS Board of Directors; Small District Council; CFPSBC; NEFCSB

8:45 - 10:15 a.m. Opening General Session

10:00 a.m. - 5:00 p.m. Non-Profit Showcase - (3 entities in hallway)

10:15 - 10:30 a.m. Break - Audubon Foyer (1st Floor)

10:30 a.m. - 12:00 noon FSBA General Membership Business Meeting {Time Certain ?? - BOD Elections (odd-numbered districts) AND Time Certain ?? - Election and Swearing in of FSBA Executive Officers for 2019-2020}

10:45 a.m. - 3:30 p.m. FADSS Superintendent Leadership Development Training Program (Superintendents Only)

12:00 noon - 1:00 p.m. Networking Luncheon/Award Ceremony

1:15 - 2:15 p.m. Breakout Session I (6 topics each presented twice)

2:15 - 2:30 p.m. Break - Audubon Foyer (1st Floor)

2:30 - 3:30 p.m. Breakout Session II (6 topics each presented twice)

2:30 - 3:30 p.m. FELL Meeting

3:30 - 3:45 p.m. Break - Audubon Foyer (1st Floor)

3:45 - 4:45 p.m. Breakout Session III (6 topics each presented twice)

3:45 - 5:00 p.m. FADSS Board of Directors' Meeting

5:00 - 5:45 p.m. Greater Florida Consortium of School Boards Business Meeting and Reception

5:30 - 6:30 p.m. Reception

FRIDAY, JUNE 14, 2019 - TENTATIVE AGENDA

7:30 - 8:30 a.m. Continental Breakfast - Audubon Foyer (1st Floor)

7:30 - 10:30 a.m. Conference Registration - Audubon Foyer (1st Floor)

8:00 - 10:00 a.m. General Session II

10:00 - 10:15 a.m. Break - Audubon Foyer (1st Floor)

10:15 a.m. - 12:00 noon Legislative Advocacy and Session Review

Florida School Boards Association



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name **Sibba Mira**

School/Department **Career and Technical Education** Position **Coordinator**

Requested Dates

From: 06/16/2019 Time 8:00 am

To: 06/19/2019 Time 8:00 pm

No. of Days: 4 days

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

Certiport Conference

Orlando - FL

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee

Signature:

Sibba Mira

Date:

3-25-19

Approved:

D. Henry

Date:

4/2/2019

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County, I hereby request a Leave of Absence for the following period of time as indicated:

Name **Olga P Vera**

School/Department **Career and Tecnical Education** Position **Specialist**

Requested Dates

From: 06/16/2019 Time 8:00 am

To: 06/19/2019 Time 8:00 pm

No. of Days: 4 days

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting

Certiport Conference

Location:

Orlando - FL

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee

Signature: *Olga P Vera*

Approved: *Sibb - H*

Not

Approved:

Leave

Granted: *Sharon Aguiar*

Not

Granted:

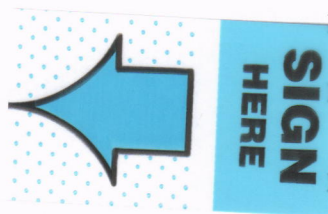
Date: 03/25/2019

Date:

Date:

Date:

Date:



4/2/2019



Subject: Request to Attend Certiport's 2019 CERTIFIED Educator Conference

Dear <<Name>>,

I would like to request approval to attend Certiport's fifth annual CERTIFIED Educator Conference, June 17-19, 2019 in Orlando, FL. This national event offers three days of professional development. During this time, I will be interacting with some of the best and brightest educators as they discuss strategies for making certification an even more powerful tool for unlocking student potential in the classroom. In addition, I will improve my professional credentials by getting certified on-site for the technology I teach.

Full conference details can be found at: www.certiport.com/certified.

My attendance will allow me to:

- **Improve My Skills.** Receive professional development to enhance my teaching skills and improve my professional credentials by becoming certified for the technology I teach. I'll also receive a certificate reflecting professional development hours earned.
- **Connect and Collaborate.** Network with hundreds of fellow educators and certification experts to share ideas, compare strategies, and learn from each other's successes through keynotes, workshops, breakout sessions, and one-on-one conversations.
- **Live their Stories.** Explore the impact certification is having on individuals' lives by hearing their stories and exploring their experiences first-hand. I'll also experience the excitement of Microsoft and Adobe's largest US-based student certification competition, the 2019 ACA and MOS U.S. National Championship, which takes place simultaneously with the CERTIFIED conference.
- **Expand My Potential.** Gain the practical knowledge and deep insights I need to become a stronger certification advocate in our school. I'll also provide a summary of my learnings and share relevant information with my colleagues upon my return.

The price for a full conference pass to CERTIFIED 2019 is \$695, but can be reduced by \$100 by registering before the early-bird deadline (April 15, 2019). There is also a 10% discount for groups of 5 or more. Certiport has secured a discounted hotel room rate of \$159/night for attendees at the Hilton Orlando Lake Buena Vista.

Here's an approximate breakdown of conference costs:

- Airfare: \$XXXX
- Transportation: \$XXXX
- Hotel (3 nights): \$XXXX
- Conference Fee: \$XXXX
- Meals: \$XXXX
- **Total: \$XXXX**

Thank you for considering this request. I look forward to your reply.

Sincerely,

<<Signature>>



Enjoy plenty of great after-hours activities in a fun, relaxed environment—including an exclusive invitation to the **2019 Microsoft Office Specialist and Adobe Certified Associate U.S. National Championship** awards ceremony.

AGENDA

- Monday

8:00 am – 5:00 pm

Certification and Practice Test Labs Open

12:00 noon – 1:30 pm

Lunch

3:30 pm – 4:30 pm

Focus Groups

6:30 pm – 9:00 pm

Networking Reception and Exhibits

AGENDA



• Tuesday

7:00 am – 8:45 am

Networking Breakfast and Exhibits

10:30 am – 11:00 am

Break

12:00 noon - 1:30 pm

Networking Lunch and Exhibits

3:00 pm – 3:30 pm

Break

4:30 pm – 5:30 pm

Free Time / Ask the Experts

8:00 pm – 10:00 pm

US Nationals Awards Ceremony



AGENDA

- Wednesday

9:30 am – 10:30 am

Breakout Sessions

11:00 am – 12:00 pm

Closing General Session - Clint Pulver



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County, I hereby request a Leave of Absence for the following period of time as indicated:

Name **Laura Liettaert**

School/Department **Key Largo School**

Position **Principal**

Requested Dates

From: Time
06/17/2019 **8:00 am**

To: Time
06/19/2019 **5:00 pm**

No. of Days: **3**

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE ☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

ISRD Principal Conference

Orlando, FL

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

Date:

3/19/2019

Approved:

Date:

4/2/2019

Not
Approved:

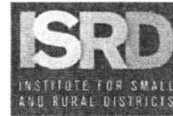
Date:

Leave
Granted:

Date:

Not
Granted:

Date:



Service . Collaboration . Achievement



**Save The
Date!**

Principal's Summer Institute

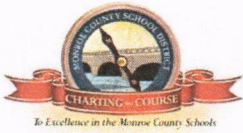
June 18 & 19, 2019

**Event Location:
Orlando, FL**

Click the link below to register:

<http://bit.ly/principalsinst>

Click [HERE](#) to provide suggestions for
discussion topics



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County, I hereby request a Leave of Absence for the following period of time as indicated:

Name Owens, David

School/Department Head Start/VPK

Position Budget Mgr.

Requested Dates

From: 06/17/2019 Time 8:00 am

To: 06/20/2019 Time 5:00 pm

No. of Days: 4.00

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

Related to Injury-In Line of Duty

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

Region IV Head Start Leadership Conference

Atlanta, GA

Travel charged to:	FUND	FUNCTION	OBJECT	CENTER	PROJECT
	0420	6400	330	9112	6100

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee Signature: David P. Owens

Digitally signed by David P. Owens
DN: cn=David P. Owens, o=Monroe County School District,
ou=Head Start/VPK,
email=david.owens@keysschools.com, c=US
Date: 2019.03.26 15:03:13 -04'00'

Date:

Approved: Marla Russell

Digitally signed by Marla Russell
Date: 2019.03.26 15:09:22 -04'00'

Date:

Not
Approved:

Date:

Leave
Granted: 

Date: 4/2/2019

Not
Granted:

Date:



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name **Marla Russell**

School/Department **Early Learning**

Position **Early Childhood Coord./Super**

Requested Dates	
From:	Time
06/17/2019	8:30 am
To:	Time
06/20/2019	4:30 pm
No. of Days: 4	

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

☐ PERSONAL LEAVE ☐ *With Pay

☐ Without Pay

Related to Injury-In Line of Duty

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

Head Start Region IV Leadership Conference

Atlanta, GA

Travel charged to:

FUND
420

FUNCTION
6400

OBJECT
330

CENTER
9112

PROJECT
6110

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

Marla Russell

Digitally signed by Marla Russell
Date: 2018.10.01 10:49:39 -04'00'

Date:

Approved:

Date:

4/2/2019

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:

SCHEDULE AT A GLANCE

This schedule is tentative and subject to change. A purchased conference registration includes all conference activities except pre-conference seminars and the Public Policy Luncheon.

MONDAY JUNE 17

PRE-CONFERENCE EVENTS

7:15 a.m. – 8:00 a.m.
Pre-Conference Registration

8:00 a.m. – 4:30 p.m.
Pre-Conference Seminars

11:30 a.m. – 1:00 p.m.
Public Policy Luncheon

Advance registration and additional fees are required for these events.

11:00 a.m. – 5:00 p.m.
General Registration

5:00 p.m. – 6:30 p.m.
Welcome Reception

TUESDAY JUNE 18

8:00 a.m. – 12:00 p.m.
Conference Registration

8:30 a.m. – 10:00 a.m.
Opening Session

10:30 a.m. – 12:00 p.m.
Concurrent Workshops

12:00 p.m. – 1:30 p.m.
Recess for Lunch

1:00 p.m. – 4:00 p.m.
Conference Registration

1:45 p.m. – 3:15 p.m.
Concurrent Workshops

3:45 p.m. – 5:00 p.m.
Afternoon Plenary Session

WEDNESDAY JUNE 19

8:00 a.m. – 12:00 p.m.
Conference Registration

8:30 a.m. – 10:00 a.m.
Concurrent Workshops

10:30 a.m. – 12:00 p.m.
Concurrent Workshops

12:00 p.m. – 1:30 p.m.
Recess for Lunch

1:45 p.m. – 3:15 p.m.
Concurrent Workshops

3:45 p.m. – 5:00 p.m.
Afternoon Plenary Session

THURSDAY JUNE 20

9:00 a.m. – 10:30 a.m.
Closing Session

"Great leadership conference!"
- June 2015 Participant

"This conference was well organized and purposefully executed."
- June 2016 Participant

"Keep up the quality of the presenters. All were excellent, knowledgeable."
- June 2017 Participant





Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name

Erica Andersen

School/Department

CORAL SHORES HIGH

Position

TEACHER

Requested Dates

From: 06/23/2019 Time 5:00 pm

To: 06/27/2019 Time 9:00 pm

No. of Days: 4

Type of Leave Requested

☐ VACATION

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

☐ SICK LEAVE

Related to Injury-In Line of Duty

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting
Pre-AP Training

Location:
USF Tampa

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

Erica Andersen

Date:

3/5/19

Approved:

Blake Z

Date:

3/5/19

Not

Approved:

Date:

Leave

Granted:

David Murphy

Digitally signed by David Murphy
DN: cn=David Murphy, o=MCSD, ou=MCSD-ADMIN,
email=dave.murphy@keysschools.com, c=US
Date: 2019.03.11 11:31:37 -04'00'

Date:

Not

Granted:

Date:



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County, I hereby request a Leave of Absence for the following period of time as indicated:

Name: Kristy Bedell

School/Department: CORAL SHORES HIGH

Position: TEACHER

Requested Dates	
From: <u>06/26/2019</u>	Time: <u>3:00 pm</u>
To: <u>06/27/2019</u>	Time: <u>9:00 pm</u>
No. of Days: <u>2</u>	

Type of Leave Requested

☐ VACATION

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

☐ SICK LEAVE

Related to Injury-In Line of Duty

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting
Pre-AP Training

Location:

USF Tampa

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

[Handwritten Signature]

Date: March 4, 2019

Approved:

[Handwritten Signature]

Date: 3/5/19

Not

Approved:

Date:

Leave

Granted: David Murphy

Digitally signed by David Murphy
DN: cn=David Murphy, o=MCSO, ou=MCSO-ADMIN,
email=dave.murphy@keysschools.com, c=US
Date: 2019.03.11 11:32:16 -04'00'

Date:

Not

Granted:

Date:



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County, I hereby request a Leave of Absence for the following period of time as indicated:

Name

Catie Frier

School/Department

CORAL SHORES HIGH

Position

TEACHER

Requested Dates

From: Time
06/23/2019 5:00 pm

To: Time
06/27/2019 9:00 pm

No. of Days: 4

Type of Leave Requested

☐ VACATION☐ PERSONAL LEAVE☐ *With Pay☐ Without Pay☐ SICK LEAVE

Related to Injury-In Line of Duty

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

A Doctor's statement is required for any extended sick leave that exceeds 30 days

ILLNESS

☐ INJURY in the line of Duty☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒

TEMPORARY DUTY ELSEWHERE: Nature of meeting
Pre-AP Training

Location:

USF Tampa

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee

Signature:

Catie Frier

Date:

8/3/25/19

Approved:

[Signature]

Date:

3/25/15

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County, I hereby request a Leave of Absence for the following period of time as indicated:

Name **Robert Kirkley**

School/Department **CORAL SHORES HIGH**

Position **TEACHER**

Requested Dates	
From:	Time
06/23/2019	5:00 pm
To:	Time
06/27/2019	9:00 pm
No. of Days: 4	

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting
Pre-AP Training

Location:

USF Tampa

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee Signature: **Robert Kirkley**

Date: **3/4/19**

Approved: **[Signature]**

Date: **3/5/19**

Not Approved:

Date:

Leave Granted: **David Murphy**

Digitally signed by David Murphy
DN: cn=David Murphy, o=MCSD, ou=MCSD-ADMIN,
email=dave.murphy@keysschools.com, c=US
Date: 2019.03.11 11:31:56 -04'00'

Date:

Not Granted:

Date:



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County, I hereby request a Leave of Absence for the following period of time as indicated:

Name **Natalie Ledoux**

School/Department **CORAL SHORES HIGH**

Position **TEACHER**

Requested Dates

From: **06/23/2019** Time **5:00 pm**

To: **06/27/2019** Time **9:00 pm**

No. of Days: **4**

Type of Leave Requested

☐ VACATION

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

☐ SICK LEAVE

Related to Injury-In Line of Duty

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting

Pre-AP Training

Location:

USF Tampa

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

N Ledoux

Date: **March 4, 2019**

Approved:

David Murphy

Date: **3/5/19**

Not

Approved:

Date:

Leave

Granted:

David Murphy

Digitally signed by David Murphy
DN: cn=David Murphy, o=MCSD, ou=MCSD-ADMIN,
email=dave.murphy@keysschools.com, c=US
Date: 2019.03.08 12:49:55 -05'00'

Date:

Not

Granted:

Date:



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County, I hereby request a Leave of Absence for the following period of time as indicated:

Name

Nancy Tuesdate

School/Department

CORAL SHORES HIGH

Position

TEACHER

Requested Dates

From: 06/23/2019 Time 5:00 pm

To: 06/27/2019 Time 9:00 pm

No. of Days: 4

Type of Leave Requested

☐ VACATION

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

☐ SICK LEAVE

Related to Injury-In Line of Duty

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

A Doctor's statement is required for any extended sick leave that exceeds 30 days

ILLNESS

☐ INJURY in the line of Duty

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting

Pre-AP Training

Location:

USF Tampa

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

Approved:

Not
Approved:

Leave
Granted:

Not
Granted:

Date:

Date:

Date:

Date:

Date:

3/26/19

3/26/19

Kristy Bedell

From: Jennifer Barrios
Sent: Friday, March 1, 2019 6:03 PM
To: Kristy Bedell
Cc: Blake Fry
Subject: Re: Pre-Register for Pre-AP Course Teacher Institutes by Feb 27 Coral Shores High School

We will need to get the teachers to complete TDEs so we can have them linked for the April 9 board meeting - the sooner we get them in the better. Thank you!

Sent from my iPhone

On Mar 1, 2019, at 11:54 AM, Kristy Bedell <Kristy.Bedell@keysschools.com> wrote:

I did preregister but it looks like it will not be invoiced until April.

Kristy Bedell

Coral Shores High School--Assistant Principal--District Induction Coordinator

305-853-3222 x56333 ~ f)305-853-3228 ~ 89901 Old Highway ~ Tavernier, FL 33070

"...every day above ground is a great day, remember that." -- Armando Christian Pérez

<image002.jpg>

From: Jennifer Barrios <Jennifer.Barrios@KeysSchools.com>
Sent: Friday, March 1, 2019 11:13 AM
To: Kristy Bedell <Kristy.Bedell@KeysSchools.com>
Subject: RE: Pre-Register for Pre-AP Course Teacher Institutes by Feb 27 Coral Shores High School

Thank you – I am working with Beryl Morgan to see if the Federal Programs might be able to cover it. I will keep you posted as to the funding source.

From: Kristy Bedell <Kristy.Bedell@KeysSchools.com>
Sent: Friday, March 1, 2019 11:10 AM
To: Jennifer Barrios <Jennifer.Barrios@KeysSchools.com>
Subject: FW: Pre-Register for Pre-AP Course Teacher Institutes by Feb 27 Coral Shores High School

The training is in June—see highlighted below. I think the pricing is all explained below but I have attached something also. The cost is \$2000 each course. \$6000 total.

We will get the online curriculum, printed materials, teacher resources, and the digital materials for the 10th grade courses. Let me know if you need any other information.

From: PreAPPL <PreAPPL@collegeboard.org>
Sent: Thursday, February 7, 2019 3:21 PM
To: Kristy Bedell <Kristy.Bedell@KeysSchools.com>
Subject: Pre-Register for Pre-AP Course Teacher Institutes by Feb 27 Coral Shores High School

<image005.png>

Dear Kristy,

Welcome to the Pre-AP Program! We're excited to partner with Coral Shores High School.

You are now invited to **pre-register** your teachers for a summer 2019 Pre-AP Course Teacher Institute. The Pre-AP Course Teacher Institutes are 4-day immersive events designed for Pre-AP teachers to begin to prepare and develop their long-term plan for the year. Pre-registration will allow you to select a Pre-AP Course Teacher Institute site and reserve spots for your Pre-AP teachers of record at the event.

Please have your designated Pre-AP Coordinator respond to this email and fill out the pre-registration table included below by Wednesday, February 27th.

About the Pre-AP Course Teacher Institute

Teachers

- It is required that all Pre-AP teachers of record take part in a Pre-AP Course Teacher Institute this summer. A Pre-AP teacher of record is anyone teaching an official Pre-AP course that your school has committed to implementing, per your signed cohort agreement.
- Teachers attend all four days, 8:30 AM to 3:30 PM

Leadership Workshop

- A one-day Pre-AP Leadership Workshop will be held on Day 4 of the Institute from 8:30 AM - 3:30 PM
- Either the designated Pre-AP Coordinator or Principal is required to attend the Leadership Workshop on Day 4 of the Institute.
- Other members of your school or district's leadership team are also invited to attend the Leadership Workshop. You are guaranteed 2 spots in the Leadership Workshop; any additional spots will be distributed as space allows.

What is Included

- Registration: There is no registration fee for your teachers to participate in the Institute.
- Meals: Snacks and lunch are included all four days of the Institute.
- Professional Learning Materials: Pre-AP course guides, Pre-AP participant learning handbooks, and access to the Pre-AP online platform will be given at the Institute.

- Sample agendas and optional pre-work will be posted to the event websites and sent out with final registration instructions in April.

What is Not Included

- Participant travel costs (gas, lodging, parking, etc.)
 - Dinners
-

Directions for Course Teacher Institute Pre-Registration

The pre-registration table included below will allow you to both select the Pre-AP Course Teacher Institute site that works best for the majority of your Pre-AP teachers of record and to share how many teachers you plan to send to the event.

Step 1: Pick your Pre-AP Course Teacher Institute site

- We have listed your Pre-AP Course Teacher Institute site options below. You may research these different options through the linked event websites.
- We are requesting, if possible, that all teachers from a given school site attend the same Pre-AP Course Teacher Institute together, as there are cross-disciplinary and school-specific planning sessions. Exceptions may be granted on a per case basis.

Step 2: Indicate the number of teachers of record, by Pre-AP course, that will attend the Institute.

- A Pre-AP teacher of record is anyone teaching a Pre-AP course that your school has committed to implementing, per your signed cohort agreement.

Step 3: Indicate the number of "other" participant spots that you are requesting, per Pre-AP course.

- Spots for additional participants, such as co-teachers or instructional coaches, may be requested.
- If an administrator wants to attend a Course Teacher Institute, we ask that they pick one course for the week. Administrators will be able to attend the Institute for the selected course through Day 3, and then attend the Leadership Workshop on Day 4.
- We cannot guarantee space for all additional participants. Spots will be distributed after all teachers of record from cohort schools are confirmed.

Step 4: Indicate how many participants you will be sending to the Leadership Workshop on Day 4.

- Either the designated Pre-AP Coordinator or Principal is required to attend the Leadership Workshop on Day 4 of the Institute.

- Other members of your school or district's leadership team are also invited to attend the Leadership Workshop. You are guaranteed 2 spots in the Leadership Workshop; any additional spots will be distributed as space allows.

Step 5: Please have your designated Pre-AP Coordinator respond to this email and fill out the pre-registration table (included below) with your participant numbers by **Wednesday, February 27th**.

Please note: this is not your final registration.

- Final registration will require participant names, roles, and contact information. Registration links and instructions will be sent to the Pre-AP Coordinator and Principal during the first week of April.
- Your registration is not confirmed. Once you and your team have registered through the official link in April, you will receive an email confirming your registration.
- **Do not book travel arrangements** until you receive this confirmation in April from the Pre-AP Professional Learning team.

2019 Pre-AP Course Teacher Institute Pre-Registration Table

**Please reply to this email and returned completed table by February 27th.*

Your Pre-AP Course Teacher Institute Site Options:

- **University of South Florida: Tampa, FL 6/24-6/27**
<http://bit.ly/PreAPFL>
- **Texas Christian University: Dallas, TX 7/22-7/25**
<http://bit.ly/PreAPDALTX>
- **Late Hire Institute**
 - If you have any teachers of record who are unable to attend one of the Institutes listed above due to outstanding circumstances (i.e. maternity leave, sick leave, or a late hiring process), we will be hosting a final "Late Hire Institute" during the week of Aug 12th - Aug 15th.
 - **Rutgers University: New Brunswick, NJ 8/12-8/15**
<http://bit.ly/PreAPNJ>

Number of participants attending the summer Course Teacher Institutes:											
	Algebra 1	Algebra 1	Arts	Arts	Biology	Biology	English 1	English 1	World History & Geography	World History & Geography	Leaders Workshop
	Teachers of Record	Other	Teachers of Record	Other	Teachers of Record	Other	Teachers of Record	Other	Teachers of Record	Other	(Day Only)
Coral Shores High School											
University of South Florida	Erica Andersen				Natalie Ledoux		Robert Kirkley				Kristy Be

6/24-6/27										
Texas Christian University										
7/22-7/25										
Rutgers University										
8/12-8/15										

Please return your completed pre-registration table (included above) by February 27. You'll receive a confirmation email once we have your submission. We will follow up with final registration links and instructions during the first week of April.

If you have any questions or need assistance with pre-registration, please reach out to PreAPPL@collegeboard.org.

Best,
The Pre-AP Professional Learning Team

Pre-AP Professional Learning
Professional Learning | Pre-AP

The College Board
250 Vesey Street, New York, NY 10281
PreAPPL@collegeboard.org



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name **Kristy Bedell**

School/Department **Coral Shores/Admin**

Position **Asst. Principal**

Requested Dates	
From:	Time
06/25/2019	5:00 pm
To:	Time
06/26/2019	8:00 pm
No. of Days: 2	

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☐ TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

AP Coordinator Training-New Procedures

Nova-Ft. Lauderdale

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee

Signature:

Date:

3/7/19

Approved:

Date:

3/7/19

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:

NSU FISCHLER COLLEGE OF EDUCATION 2019 APSI WEEK 1

GENERAL OPTIONS

Name:

Kristy Bedell

Title:

ASSISTANT PRINCIPAL

Address:

89901 Old Road

Tavernier, Florida 33070

USA

Confirmation Number:

PYNLV8P5M5Y (needed to modify your registration)

Event Title:

NSU Fischler College of Education 2019 APSI Week 1

Location:

Nova Southeastern University, Fort Lauderdale Campus

3301 College Avenue

Davie, Florida 33314

USA

Phone:

954/262-8525

Date:

06/24/2019

Time:

8:00 AM

CURRENT REGISTRATION DETAILS

Kristy Bedell

Sessions

Date and Time	Session	Cost
06/26/2019 8:00 AM	AP Coordinator Workshop: Parts 1 and 2 (full day)	Complimentary

ORDER SUMMARIES

Order

Date	Type	Invoice #	Amt Ordered	Amt Paid	Amt Due
03/07/2019 11:10 AM ET	offline order	CV-2461-0008-0008	\$0.00	\$0.00	\$0.00
Total:			\$0.00	\$0.00	\$0.00

PAYMENT DETAILS



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Requested Dates	
From:	Time
7/17/19	12P
To:	Time
7/11/19	10P
No. of Days: 5.5	

Name Dabney Abbott

School/Department

Marathon High School

Position

Art Teacher

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request form.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

AP Summer Institute

Gulfport, FL

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

[Signature]

Date: 03/04/19

Approved:

[Signature]

Date: 3/4/19

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name Michelle James

School/Department

Marathon HS / Math

Position

Teacher

Requested Dates

From: July 7th, 2019 Time 5pm

To: July 11th, 2019 Time 9pm

No. of Days: _____

Type of Leave Requested

☐ VACATION

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

☐ SICK LEAVE

Related to Injury-In Line of Duty

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet.)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ ILLNESS

☐ INJURY in the line of Duty

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting

AD Summer Institute

Location:

Davie, FL

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

[Signature]

Date: 3/8/19

Approved:

[Signature]

Date: 3/11/19

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:

NSU FISCHLER COLLEGE OF EDUCATION

2019 APSI WEEK 2

OVERVIEW

Nova Southeastern University's Abraham S. Fischler College of Education, in cooperation with the College Board, is pleased to offer the Summer Institute for teachers of Advanced Placement, a quality program with leading instructors in their disciplines.

All workshops are designed to benefit both new AP teachers (who will be teaching AP courses for the first time during the 2019-2020 school year), or those who have been teaching AP courses for 1 to 3 years.

Dates for the 2019 Advanced Placement Summer Institute are:

Week 1 – June 24, 25, 26, 27, 2019

Week 2 – July 8, 9, 10, 11, 2019

All attendees must have an AP Central account to complete the registration process.

Registration Options:

- If you are an Attendee (participant) registering and paying yourself, you must pay with a credit card (Visa, MC, Amex) at the time of registration.
- If you are an Attendee (participant) registering and have received a scholarship from the College Board, Florida Partnership, School, or School District you must email NSU/APSI fce.apsi@nova.edu to request the scholarship code before you complete the registration process.

All attendees must be sure to select the AP workshop for the session/week that you plan to attend (i.e., Workshop Name: AP European History and the code for that workshop).

AVAILABLE WORKSHOPS

Week 1: June 24 – 27, 2019

- AP Calculus AB
- AP English Literature and Composition
- AP Environmental Science
- AP Government and Politics - U.S.
- AP Physics 1: Algebra-Based
- AP U.S. History
- AP World History
- AP Coordinator Workshop (One Full day only for Coordinators on June 26, 2019)

Week 2: July 8 – 11, 2019

- AP Art History
- AP Calculus BC
- AP Chemistry
- AP Computer Science A
- AP European History
- AP Human Geography
- AP Physics 2: Algebra-Based
- AP Psychology
- AP Spanish Language and Culture
- AP Statistics

DETAILS

The 2019 AP Summer Institute will be held at NSU's Fort Lauderdale/Davie Campus, located at 3301 College Avenue, Davie, FL. 33314.

Headquarters for NSU's APSI will be at the **Carl DeSantis Building** (home to NSU's College of Business & Entrepreneurship).

Parking:

Free parking for the APSI attendees (participants) will be located on the second floor and above in the NSU ASLRITC parking garage located next to the Carl DeSantis Building. A parking pass will be emailed to you the week prior to your APSI session to be used during your attendance at the APSI and must be displayed on the dashboard of your car. Further instructions and directions to the parking garage will be included on the pass.

IMPORTANT: DO NOT park on the ground floor of the parking garage, you will be charged.

When

Monday, July 8, 2019 - Thursday, July 11, 2019

8:00 AM - 4:30 PM

Eastern Time

Where

Nova Southeastern University, Fort Lauderdale Campus

3301 College Avenue

Davie, Florida 33314

USA

954-262-8525

Planner

Carole Benedict

ADDITIONAL INFORMATION

College Board, AP®, Advanced Placement®, Advanced Placement Program®, Capstone™ and the acorn logo are registered trademarks of the College Board. Used with permission."



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name **Jason Brown**

School/Department **Operations & Facilities**

Position **Safety & Security Coordinator**

Requested Dates	
From:	Time
07/07/2019	5:00 pm
To:	Time
07/12/2019	5:00 pm
No. of Days: 5	

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting



TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

2019 FASRO Conference

Miami, FL

Travel charged to:	FUND	FUNCTION	OBJECT	CENTER	PROJECT
	0110	7900	0330	9155	8645

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

Jason D. Brown

Digitally signed by Jason D. Brown
DN: cn=Jason D. Brown, o=Monroe County School District,
ou=Safety and Security Coordinator,
email=Jason.Brown@KeysSchools.com, c=US
Date: 2019.03.27 16:19:18 -04'00'

Date: **03/27/2019**

Approved:

Date:

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name **Patrick Lefere**

School/Department **Operations and Planning**

Position **Executive Director**

Requested Dates	
From:	Time
07/08/2019	8:00 am
To:	Time
07/12/2019	5:00 pm
No. of Days: 5	

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting



TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

2019 FASRO Conference

Miami, FL

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

Date: **04/03/2019**

Approved:

Date:

Not
Approved:

Date:

Leave
Granted:

Date:

Not
Granted:

Date:



"Our Oath"



Monday, 7-8-19

7:00-9:30	Coffee Bar
9:00-12:00	Opening Ceremonies
12:00-1:00	Lunch on your own
1:00-5:00	"Single Officer Response to an Active Shooter" A.J. DeAndrea



Tuesday 7-9-19



7:00-8:30	Coffee Bar
8:00-10:00	“Threat Assessment and De-Escalation in a School Setting” Dr. Dorothy Espelage
10:00-12:00	“Las Vegas Shooting” TBA Las Vegas Police Department
12:00-1:00	Lunch on your own
1:00-5:00	“San Bernardino Shooting - Lessons Learned” Chief Travis Walker Cathedral City Ca. Police Department



Wednesday 7-10-19



8:00-9:30	Safe School Assessments Curt Lavarello School Safety Advocacy Council
10:00-12:00	SRO Legal Updates Maria Schneider, Assistant State Attorney Office of the State Attorney Juvenile Division 17th Judicial Circuit of Florida
12:00-1:00	Lunch on your own
1:00-5:00	Social Networking Opportunities Miami Florida



Thursday 7-11-19



7:00-8:30

Coffee Bar

8:00-10:00	Creating Positive Attitudes Rufus Lott III Eydie Tricquet 2 HOURS	Sex Offender Behaviors Online Dep. Michael Evans Okaloosa County SO 2 HOURS	LEO suicide, a Disturbing Trend Lt. Leslie Weidenhammer Collier County SO 2 HOURS	Critical Incident Planning 101 Andrew Davis Alachua County Sheriff's Office 2 HOURS	The Proactive Mindset Capt. Dave Allen Okaloosa County Sheriff's Office 2 HOURS	Be Alert An Overview Brad Spicer Safe Plans 4 HOURS	Florida Gang Update Norm Miller FGIA 2 HOURS	Crisis Intervention/Autism Spectrum Related Disorders Training Dr. Kim Spence 2 HOURS
10:00-12:00	Creating Positive Attitudes Rufus Lott III Eydie Tricquet 2 HOURS	Sex Offender Behaviors Online Dep. Michael Evans Okaloosa County SO 2 HOURS	LEO suicide, a Disturbing Trend Lt. Leslie Weidenhammer Collier County SO 2 HOURS	Critical Incident Planning 101 Andrew Davis Alachua County Sheriff's Office 2 HOURS	The Proactive Mindset Capt. Dave Allen Okaloosa County Sheriff's Office 2 HOURS		Florida Gang Update Norm Miller FGIA 2 HOURS	Crisis Intervention/Autism Spectrum Related Disorders Training Dr. Kim Spence 2 HOURS
12:00-1:00	LUNCH On your own	LUNCH On your own	LUNCH On your own	LUNCH On your own	LUNCH On your own	LUNCH On your own	LUNCH On your own	LUNCH On your own
1:00-3:00	Creating Positive Attitudes Rufus Lott III Eydie Tricquet 2 HOURS	Social Media Survival Dep. Michael Evans Okaloosa County SO 2 HOURS	Chasing the Dragon The Life of an Opiate Addict Khalilah Escalera Joseph Smith U.S. Attorney's Office Middle District of Florida 2 HOURS	FSU Active Shooter Chief David Perry 2 HOURS	The Proactive Mindset Capt. Dave Allen Okaloosa County Sheriff's Office 2 HOURS	Be Alert An Overview Brad Spicer Safe Plans 4 HOURS	Stop the Bleed Bill Hilchey Lake County Sherriff's Office 2 HOURS	Sandy Hook Promise Know the Signs Blair Freedman 2 HOURS
3:00-5:00	Creating Positive Attitudes Rufus Lott III Eydie Tricquet 2 HOURS	Social Media Survival Dep. Michael Evans Okaloosa County SO 2 HOURS	Chasing the Dragon The Life of an Opiate Addict Khalilah Escalera Joseph Smith U.S. Attorney's Office 2 HOURS	FSU Active Shooter Chief David Perry 2 HOURS	The Proactive Mindset Capt. Dave Allen Okaloosa County Sheriff's Office 2 HOURS		Stop the Bleed Bill Hilchey Lake County Sherriff's Office 2 HOURS	Sandy Hook Promise Know the Signs Blair Freedman 2 HOURS



Friday 7-12-19



7:00-8:30	Coffee Bar
8:00-11:00	Drawing for 2 Free 2020 FASRO Conference Registrations Rosen Centre Orlando, Florida
11:00-12:00	Regional Directors Meeting with Members

Executive Board

Executive Director **Timothy Enos**

President **Michael Marden**

President- Elect **Samantha Schill**

Secretary **Paul Emmons**

Treasurer **Casey Hamilton**

Special Appointments

SSAC **Curt Lavarello**

Training Coordinator **Robert Tricquet**

Attorney General Advisor **Edward Upthegrove**

General Counsel **Vanessa Snow**

P.I.O. **Dale Tharp**

FGIA **Norm Miller**

Regional Directors 2018-2020

Region 1 Escambia, Santa Rosa, Okaloosa-, Walton, Holmes, Washington,

Bay, Jackson, Calhoun, Gulf, Gadsden, Liberty, Leon **Robby Martin**

Region 2 Franklin, Wakulla, Jefferson, Madison, Taylor, Hamilton, Suwannee,

Lafayette, Dixie, Columbia, Baker. **Jacquelyn Knight**

Region 3 Nassau, Duval, St John's, Flagler, Clay, Putnam, Union, Bradford,

Alachua, Gilchrist, Levy. **Andrew Davis**

Region 4 Volusia, Seminole, Orange, Osceola, Brevard, Lake. **Angel Durham**

Region 5 Marion, Polk, Citrus, Sumter, Hernando, Pasco, Pinellas. **Sean Finney**

Region 6 Hillsborough, Manatee, Hardee, Sarasota, Desoto, Charlotte, Lee **Kristopher Townsley**

Region 7 Indian River, Okeechobee, St. Lucie, Highlands, Martin, Glades, Hendry. **Anthony Beachum**

Region 8 Palm Beach, Broward, Dade, Collier, Monroe. **Beth Jones**

Committees

Scholarships **Dale Tharp**



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name

Stanford Hancock

School/Department

MHS

Position

Music Teacher

Requested Dates

From: 7/21/19 Time: 12pm

To: 7/25/19 Time: 10pm

No. of Days: _____

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request form.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☒ TEMPORARY DUTY ELSEWHERE: Nature of meeting

AP

Location: USF campus

APSI - Tampa, FL - Music Theory training

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee

Signature:

Stanford Hancock

Date:

3/4/19

Approved:

Wendy Matheson

Date:

3/4/19

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:

Registration for this summer's APSI will
OPEN Monday, April 1st.

Welcome USF Tampa - Week 1 Advanced Placement Summer Institute 2019!

If you have any questions that are not answered on this site you may contact Yashira Cabrera.

Welcome

Hosted by the David C. Anchin Center, the Advanced Placement Summer Institute (APSI), offers a unique learning experience for teachers interested in expanding their knowledge of Advanced Placement (AP) course content, structure, and methodology. In addition, the workshops afford teachers the opportunity to interact with colleagues and to discuss issues and concerns surrounding the AP courses they will teach.

AP and Non-AP Teachers from all over the globe come to USF Tampa APSI to enjoy this 4 - day intensive training while enjoying the growth that comes from exchanging ideas and information about AP courses, exams and relationships. Many non AP teachers choose to attend the institute as a way of learning ways to prepare their students to excel in AP courses.

Our College Board consultants come from many different states and represent the best of the best. All are experienced, knowledgeable, inspiring and will give you a wealth of new tools, strategies, and resources for increasing your students' success and your teaching effectiveness. Our outstanding consultants will change the way you look at education! Get to know your instructor before you arrive by reviewing their biography, available in the Speakers tab.

Who is APSI for?

The Advanced Placement Summer Institute at USF Tampa is designed for teachers of all experience levels.

- **NEW** - courses are designed for teachers who have been teaching the AP course 0 - 3 years. *note: if you have taught an AP course before but are NEW to teaching the subject you are registering for, you are considered a NEW teacher because you are new to that subject.*
- **EXPERIENCED** - courses are for teachers who have been in the AP subject for 4 years or more.
- **NEW & EXPERIENCED** - courses will have a mixture of teacher experience ranging from beginner to experienced. New teachers that have taught the subject previously often enjoy learning techniques and advice from more seasoned teachers in the subject area.

Registration:

In order to register for APSI you must have an AP Central account.

There are two registration options available: Attendee and Administrator.

- If you are a participant registering yourself you are able to pay with credit card (Visa, MasterCard, Amex) or a scholarship with the appropriate scholarship code.
- If you are a school administrator you are able to register your attendees with the following payment options: Credit Card, Purchase Order, Scholarship.

- If you choose the Purchase Order option you MUST be invoiced by USF Tampa. Please DO NOT SEND CHECKS unless you have received an official USF invoice.

Group Registration:

You are now able to register up to 10 teachers at a time and submit payment for all at the time of registration. The person completing the registration is the 'group leader' but each person is able to make modification to his/her registration as needed.

Schedule:

Courses run Monday through Thursday, from 8:00am - 4:00 / 4:30pm.

Lunch and Break times along with the length of each is at the instructors' discretion. We trust our instructors to provide you with the best experience and using time wisely.

Arrival:

Participants should plan on arriving between 7:15am - 7:35am to allow time to park and locate your building and classroom time.

Please keep in mind that USF Tampa is a large university campus and you will need to walk from the designated parking areas to your classroom and lunch locations.

**Available Courses**

- Biology
- Calculus AB / BC
- Chemistry
- *Chinese Language & Culture (NEW!!)*
- Computer Science Principles
- English Language and Composition
- English Literature and Composition
- Environmental Science
- European History
- Government & Politics U.S
- *Government & Politics: Comparative*
- Human Geography
- *Macroeconomics (NEW!!)*
- Micro/Macro Economics - combined course
- Music Theory
- Physics 1: Algebra Based
- Physics C: Electricity & Magnetism + Mechanics
- Psychology

- Spanish Language and Culture
- Spanish Literature & Culture
- Statistics
- Studio Art
- U.S. History
- World History

Details**When**

07/22/19 - 07/25/19

7:45 AM - 4:00 PM

Eastern Time

Where

University of South Florida - Tampa Campus

David C. Anchin Center

4202 E. Fowler Avenue DAC 101

Tampa, Florida 33620

USA

813-974-7898

PlannerYashira Cabrera**Additional Information**

This AP Summer Institute
has been endorsed by



Advanced Placement
Program



UNIVERSITY OF
SOUTH FLORIDA
COLLEGE OF EDUCATION

College Board, AP[®], Advanced

*Placement[®], Advanced Placement Program[®], Capstone[™] and the acorn logo are
registered trademarks of the College Board. Used with permission."*



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County, I hereby request a Leave of Absence for the following period of time as indicated:

Name Carl Bish

School/Department Marathon MHS Position Science Teacher

Requested Dates	
From:	Time
<u>July 21, 2019</u>	<u>7Am</u>
To:	Time
<u>July 26, 2019</u>	<u>4pm</u>
No. of Days: <u>6</u>	

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting

☐ TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

APST Env. Sci. David C. Archin Chr. 4202 E. Fowler Ave DAC 101, Tampa FL 33620

Travel charged to:

FUND

FUNCTION

OBJECT

CENTER

PROJECT

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee

Signature:

Approved:

Not

Approved:

Leave

Granted:

Not

Granted:

Date: 3-12-19

Date: 3-12-19

Date:

Date:

Date:

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subject.

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- Calculus AB / BC
- Chemistry
- *Chinese Language & Culture (NEW!!)*
- Computer Science Principles
- English Language and Composition
- English Literature and Composition
- Environmental Science
- European History
- Government & Politics U.S
- *Government & Politics: Comparative*
- Human Geography
- *Macroeconomics (NEW!!)*
- Micro/Macro Economics - combined course
- Music Theory
- Physics 1: Algebra Based
- Physics C: Electricity & Magnetism + Mechanics
- Psychology
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- Spanish Literature & Culture
- Statistics
- Studio Art
- U.S. History
- World History

Details

When

07/22/19 - 07/25/19

7:45 AM - 4:00 PM

Eastern Time

Where

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David C. Anchin Center

4202 E. Fowler Avenue DAC 101

Tampa, Florida 33620

USA

813-974-7898

Planner

Yashira Cabrera

Additional Information

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has been endorsed by



Advanced Placement
Program



UNIVERSITY OF
SOUTH FLORIDA
COLLEGE OF EDUCATION

College Board, AP[®], Advanced

Placement[®], Advanced Placement Program[®], Capstone[™] and the acorn logo are
registered trademarks of the College Board. Used with permission."



Request for Leave

Please Print or Type

For Office Use Only

RUN # _____

Pay Type _____

In accordance with administrative regulations of the District School Board of Monroe County,
I hereby request a Leave of Absence for the following period of time as indicated:

Name **Suanne Lee**

School/Department **Internal Services**

Position **Director**

Requested Dates	
From:	Time
08/24/2019	8:00 am
To:	Time
08/29/2019	5:00 am
No. of Days: 5 (3 work)	

Type of Leave Requested

☐ VACATION

☐ SICK LEAVE

Related to Injury-In Line of Duty

☐ PERSONAL LEAVE

☐ *With Pay

☐ Without Pay

(*Explanation: If this request is submitted less than five (5) days prior to the dates requested, after the date requested or for a day before or after a holiday or recess period, an explanation of the circumstances must be provided on this form or on an attached sheet)

☐ JURY DUTY

☐ MILITARY LEAVE

☐ FAMILY MEDICAL LEAVE- Eligible employees may request up to twelve weeks of unpaid leave. FML application must be completed & submitted with leave request from.

EXTENDED SICK LEAVE - (Without Pay) Related to:

ILLNESS

☐ INJURY in the line of Duty

A Doctor's statement is required for any extended sick leave that exceeds 30 days

☐ OTHER:

Explain

TEMPORARY DUTY IN-COUNTY:

Nature of meeting



TEMPORARY DUTY ELSEWHERE: Nature of meeting

Location:

NIGP Government Procurement

Austin, TX

Travel charged to:

FUND
110

FUNCTION
7760

OBJECT
330

CENTER
9281

PROJECT
0001

In order to receive reimbursement for this leave, a travel voucher must be submitted to the District office within 30 days of the return date. Attach a copy of Meeting Notification and/or Agenda

Employee
Signature:

Suanne Lee

Digitally signed by Suanne Lee
DN: cn=Suanne Lee, o=Monroe County School District,
ou=Director of Internal Services,
email=suanne.lee@keysschools.com, c=US
Date: 2019.03.05 15:03:10 -05'00'

Date:

Approved:

Date:

Not

Approved:

Date:

Leave

Granted:

Date:

Not

Granted:

Date:

Schedule-at-a-Glance

<https://nsite.nigp.org/2019annualforumandproductsexpo/schedule/schedule-glance> (https://nsite.nigp.org/2019annualforumandproductsexpo/schedule/schedule-glance)

Austin Convention Center

Austin, Texas

All activities will take place at the Austin Convention Center unless noted otherwise.

** Schedule is subject to change. **

Saturday, August 24

TIME	EVENT	Contact Hours
9:00 am - 7:00 pm	Registration Center Open	

Sunday, August 25

TIME	EVENT	Contact Hours
7:00 am - 6:30 pm	Registration Center Open	
7:00 am - 8:00 am	Breakfast at your leisure (<i>full Forum package and individual ticket holders only</i>)	
8:00 am - 10:00 am	Opening Ceremonies and Keynote Speaker	1,0
10:15 am - 12:15 pm	Agency-based Networking Sessions	2,0
12:15 pm - 2:15 pm	Lunch on own	
2:00 pm - 3:15 pm	Concurrent Sessions	1,25
3:30 pm - 6:30 pm	Exhibit Hall Open	

Monday, August 26

TIME	EVENT	Contact Hours
7:30 am - 5:00 pm	Registration Center Open	
8:00 am - 9:30 am	Plenary Session	1,0
9:30 am - 1:30 pm	Exhibit Hall Open/Lunch	
1:45 pm - 3:00 pm	Concurrent Sessions	1,25
3:15 pm - 4:30 pm	Concurrent Sessions	1,25
6:00 pm - 11:00 pm	Social Event (location TBD)	

Tuesday, August 27

TIME	EVENT	Contact Hours
7:30 am - 5:00 pm	Registration Center Open	
8:00 am - 9:30 am	Plenary Session	1,0
9:45 am - 11:00 am	Concurrent Sessions	1,25
11:15 am - 1:30 pm	Awards Lunch	
1:45 pm - 3:00 pm	Concurrent Sessions	1,25
3:15 pm - 4:30 pm	Concurrent Sessions	1,25

Wednesday, August 28

TIME	EVENT	Contact Hours
8:00 am - 4:00 pm	Registration Center Open	
8:00 am - 9:15 am	Concurrent Sessions	1,25
9:30 am - 10:45 am	Plenary Session	1,25
11:00 am - 12:30 pm	Lunch on own	
12:45 pm - 2:00 pm	Plenary Session	1,25
2:15 pm - 3:30 pm	Networking Sessions	1,25
3:45 pm - 5:00 pm	Closing General Session	1,00

Full Forum Package and Forum Lite Registrants may earn up to 18.5 contact hours.

Schedule is subject to change.