

**Huron School District
New Hire Justification**

Date: 3/9/17

Applicant Information

Applicant Name: Sandra Brueske

Address: PO Box 113, Woonsocket, SD 57385

Phone: 6057964068

Education: HS Diploma – Needs Para Pro

Experience: 5 Year

References: Teresa Fonder, Jeannie Hjelm, Olaus Lyons

Reason for New Hire

New Position:

Replacement: Replace Karen Hofer.

Position Information

Department: SPED

Position: Para at High School

Supervisor: Kari Eulberg

Responsibilities: SPED Para

Hours: 7.5 Hours

Hiring Information

Wages: \$14.28 (\$13.53 Sub Pay, Step Zero until Para Pro Completed)

Classification: Step Five

Wage Justification: 5 Years Experience at ATC

Start Date: March 20, 2017

Requested by: Lori Wehlander (Administrator)

PO Box 949
Huron, SD 57350
605-353-6992



Sherri Nelson
Director of Curriculum,
Instruction, and Assessment
Sherri.Nelson@k12.sd.us

INTENT TO APPLY FOR GRANT FUNDING --- Any person or group applying for grant funds is expected to complete this form prior to submitting any grants or requesting funds that will impact the Huron School District.

Date: 3/3/17 Group Applying: HMS Academic Competitions Contact Person: Colleen Jensen

Name of Grant/Award: Huron Youth Leadership Council (HYLC)

Name of Funder: HYLC Contact Person: Rhonda Kludt

Amount to be Requested: \$500.00 Funder's Submission Due Date: March 13, 2017

Project Focus: Providing standards driven academic preparation and competitions.

How awarded amount received? Full amount up front Reimbursement

Are any follow up reports required? Yes No If yes, when are they due?

Is any District funding, resource, or in-kind commitment required now or in the future? Yes No

If yes, please list by dollar amount and/or in-kind service/support. Be specific:

Please note:

- Each school/individual will be responsible for submitting and following through on the grant application process unless other arrangements have been made.
- The person or group applying will need to submit the following documentation to the curriculum and business offices:
 - A copy of the completed grant application.
 - If and when the grant is awarded, a copy of the award letter.
 - If any follow-up reports are required, a copy of the report.

A copy of this request with signatures will be returned to the contact person above when the application is reviewed, allowing the application to proceed.

Signature: M. Taplett 3/8/17
Building/Department Administrator Date

Signature: Sherri Nelson _____
Sherri Nelson, Director of Curriculum, Instruction & Assessment Date

Signature: Kelly Christopherson 3-9-17
Kelly Christopherson, Business Manager Date

Date Presented to School Board: _____

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INTENT TO APPLY FOR GRANT FUNDING --- Any person or group applying for grant funds is expected to complete this form prior to submitting any grants or requesting funds that will impact the Huron School District.

Date: 3/9/17 Group Applying: SPED/Special Olymp^{ic} Contact Person: Lori Wehlander

Name of Grant/Award: ~~Therapeutic~~ Huron Youth Leadership Council

Name of Funder: HYLC Contact Person: Rhanda Kludt

Amount to be Requested: \$500.00 Funder's Submission Due Date: 3-13-17

Project Focus: Therapeutic and adaptive swimming lesson

How awarded amount received? Full amount up front Reimbursement

Are any follow up reports required? Yes No If yes, when are they due?

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Signature: Lori Wehlander Date: 3-8-17
Building/Department Administrator

Signature: Sherri Nelson Date: _____
Sherri Nelson, Director of Curriculum, Instruction & Assessment

Signature: Kelly Christopherson Date: 3-9-17
Kelly Christopherson, Business Manager

Date Presented to School Board: _____

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INTENT TO APPLY FOR GRANT FUNDING --- Any person or group applying for grant funds is expected to complete this form prior to submitting any grants or requesting funds that will impact the Huron School District.

Date: 3/6/17 Group Applying: Destination Imagination Contact Person: Bobbie Matthews

Name of Grant/Award: Dakota Provisions

Name of Funder: Huron Community Foundation
Amount to be Requested: 2,000 Funder's Submission Due Date: NA

Project Focus: Creative Problem solving and teamwork

How awarded amount received? Full amount up front Reimbursement

Are any follow up reports required? Yes No If yes, when are they due?

Is any District funding, resource, or in-kind commitment required now or in the future? Yes No

If yes, please list by dollar amount and/or in-kind service/support. Be specific:

Please note:

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