Brookings County

Travel/Education Request Form

Name(s) Joyce Dragseth / Chris Lilla

Department DOE Position: DOE / Deputy

Travel/Education

Date(s)	Beginning Odometer	Ending Odometer	Destination
January 20, 2016			McCook County /Salem

Reason for Travel: SDAAO District 5 Quarterly Meeting

Estimated Expenses:

- Method of Travel: __x_ County Vehicles
- Air Travel =$

  ___ Miles @ $_____per mile = $ _____

- Meals:

Breakfast	@$ 6.00	= $ 0.00
Lunch	2@$11.00	= $ 22.00
Dinner	@$15.00	= $ 0

Employees will not be reimbursed for meals that are included in the registration fee.

- Additional Expenses (taxi, parking, etc):
  Please list:
- Lodging: = $ 0.00
-
- Registration Cost = $ 0.00

Total Cost Estimate = $ 22.00

Department Head designated mileage rate: $_____/per mile

- A travel advance form is attached to this request yes_____ no __X___

Joyce Dragseth

Department Head Signature

12-31-2015

Date

Brookings County

Travel / Education Request Form

Name(s) Vicki Buseth Jennifer Beller

Department Finance Position(s) Finance Off. Sr. Finance Asst

Travel/Education

Date(s)	Beginning Odometer	Ending Odometer	Destination
1-20-16			Mitchell

Reason for Travel Annual Report Workshop

Passengers _____

Estimated Expenses

- *Method of Travel:* X *County Vehicle* ____ *Private Auto*

  ____ miles @ $____/*per mile* = $ _____

- *Meals:* ____ *Breakfast* @ $ _____ = $ _____
  2 *Lunch* @ $ 11.00 = $ 22.00
  ____ *Dinner* @ $ _____ = $ _____

- *Additional Expenses (taxi, parking, etc)*
  Please list _____ = $ _____

- *Lodging:* ____ *Estimated number of days/ nights* = $ _____

- *Registration* ____ *Estimated cost* = $ —

Total Cost Estimate = $ _____

Department Head designated mileage rate: $ ____/*per mile*

Vicki Buseth 1/7/16

Department Head Signature *Date*

REGISTRATION

2016 Annual Report Workshop

Mitchell, SD
January 20, 2016

DEADLINE for Registration is **January 15, 2016.**

Dress is business casual

County: Brookings

Please register the names, titles, and phone numbers of those who will be attending:

Name	Title	** Cell/home phone #
Vicki Buseth	Finance Officer	605-690-1358
Jennifer Beller	Sr. Finance Asst	605-370-2440

**** Please provide a phone number where you can be reached in case of cancellation due to inclement weather!**

PLEASE RETURN THIS FORM BY E-MAIL, FAX OR U.S. MAIL to:

South Dakota Association of County Officials
211 E Prospect Ave
Pierre, South Dakota 57501

Fax 605-224-4833
sdaco@sdcounties.org

Any questions please call: (605) 224-4554

Brookings County

Travel/Education Request Form

Name(s) Robert W. Hill, Richard Haugen, Shawn Plowman and Michele Delaney

Department County Development Position Director

Travel/Education

Date(s)	Beginning Odometer	Ending Odometer	Destination
01/25/2016			Watertown, SD

Reason for Travel:

Attend a SDOEM training class on the RapidTag Printer system.

Passengers: 3

Estimated Expenses:

•Method of Travel: ☑ County Vehicle ☐ Private Auto ☐ Air

_____ Miles $ _____ /mile =$ 0.00

•Meals:

0	Breakfast @	$ 6.00	=$	0.00
4	Lunch @	$ 11.00	=$	44.00
0	Dinner @	$ 15.00	=$	0.00

Employees will not be reimbursed for meals that are included in the registration fee.

•Additional Expenses (taxi, parking, etc.):

Please list None =$

•Lodging: 0 Estimated number of days/nights =$

•Registration: 0 Estimated Cost =$

Total Cost Estimate =$ 44.00

•Department Head designated mileage rate: $ 0.00 /mile

•A travel advance form is attached to this request ☐ Yes ☑ No

Robert W. Hill

Department Head Signature

1-07-2016

Date

Brookings County

Travel/Education Request Form

Name(s) Jim Sampson

Department Commission Position GIS Coordinator

Travel/Education

Date(s)	Beginning Odometer	Ending Odometer	Destination
January 27, 2016			Huron, SD

Reason for Travel:

GIS Workflow Presentation and DIMES Training presented by GeoComm

Passengers: _____

Estimated Expenses:

•Method of Travel: ☐ County Vehicle ☑ Private Auto ☐ Air

150 Miles $ 0.42 /mile =$ 63.00

•Meals:

_____ Breakfast @ $ _____ =$ 0.00

1 Lunch @ $ 11.00 =$ 11.00

_____ Dinner @ $ _____ =$ 0.00

Employees will not be reimbursed for meals that are included in the registration fee.

•Additional Expenses (taxi, parking, etc.):

Please list _____ =$ _____

•Lodging: _____ Estimated number of days/nights =$ _____

•Registration: _____ Estimated Cost =$ _____

Total Cost Estimate =$ 74.00

•Department Head designated mileage rate: $ _____ /mile

•A travel advance form is attached to this request ☐ Yes ☐ No

Stacy Jeffensen 1-6-16

Department Head Signature *Date*

GIS Workflow Presentation and DIMES Training Presented by GeoComm

Date and Time	Who Should Attend
January 26, 2016 10:00 a.m. – 2:00 p.m. Rapid City - Pennington County Emergency Management 130 Kansas City Street, Ste. 130A Rapid City, 57701 OR January 27, 2016 10:00 a.m. – 2:00 p.m. Huron Campus Center, Wollman Room 333 9th Street SW Huron, 57350	PSAP Managers and/or Supervisors 9-1-1 Coordinators County GIS representative Any individual that would be responsible for maintaining or reporting on GIS data, ALI or MSAG information as it relates to 9-1-1 service. Please RSVP to: chayes@geo-comm.com by January 15 There will be a session recording available to those who are not able to attend.

Purpose

The purpose of this training is to introduce the South Dakota counties to the Next Generation 9-1-1 Data Integration Management System (DIMES) system as well as present the workflows for GIS data maintenance in this state NG9-1-1 system. Over the last year, the counties' GIS and 9-1-1 groups have worked towards improving GIS data that will be used to consolidate into a statewide GIS dataset. This important GIS dataset is an integral component for the move to a fully integrated NG9-1-1 system in South Dakota.

To receive access to the DIMES system, the attached User Permission form should be completed and returned to SDDIMES@geo-comm.com.

TIME	AGENDA
10:00 – 11:00	☐ Welcome and Introductions ☐ DIMES workflow presentation ◘ County Data Preparation for DIMES ◘ GeoComm SD DIMES Process Overview) ◘ County/Region QC Error Report and Remediation Management Workflow ◘ GeoLynx Server Change Request GIS Updates Workflow
11:00 – 11:15	BREAK
11:15 – 12:15	☐ DIMES end user training ◘ General Background Discussion ◘ DIMES Users Guide ◘ DIMES Functionality & Procedural Training ■ GeoLynx Server GIS Portal ■ Discrepancy Viewer add-on
12:15 – 1:15	LUNCH BREAK
1:20 – 2:00 p.m.	☐ DIMES end user training (continued) ◘ DIMES Functionality & Procedural Training ■ Managing QA/QC exceptions ■ Accessing QA/QC reports ■ Change Requests (optional) ☐ Questions?

Brookings County

Travel / Education Request Form

Name(s) MICHAEL GENGLER

Department BROOKINGS CO. SHERIFF Position(s) DEPUTY SHERIFF

Travel/Education

Date(s)	Beginning Odometer	Ending Odometer	Destination
2/2/16			MITCHELL

Reason for Travel GLOCK ARMORER'S COURSE

Passengers _____

Estimated Expenses

- *Method of Travel:* X *County Vehicle* ____ *Private Auto*

  ____ miles @ $____/*per mile* = $ _____

- *Meals:* 1 *Breakfast* @ $ 6.00 = $ 6.00
  1 *Lunch* @ $ 11.00 = $ 11.00
  1 *Dinner* @ $ 15.00 = $ 15.00

- *Additional Expenses (taxi, parking, etc)*
  Please list _____ = $ 0

- *Lodging:* 0 *Estimated number of days/ nights* = $ 0

- *Registration* 1 *Estimated cost* = $ 250.00

Total Cost Estimate = $ _____

Department Head designated mileage rate: $ ____/*per mile*

Department Head Signature 1-6-16 *Date*

Jon Pike

From: Auto-Receipt <noreply@mail.authorize.net>
Sent: Tuesday, January 05, 2016 2:28 PM
To: Jon Pike
Subject: Transaction Receipt from GLOCK Professional, Inc. for 250.00 (USD)

Order Information

Description: GLOCK Training: Class: 104149 - Armorer's Course
Invoice Number: 202287

Billing Information
JON PIKE
315 7th Ave
Brookings, SD 57006
USA
jpike@brookingscountysd.gov

Shipping Information

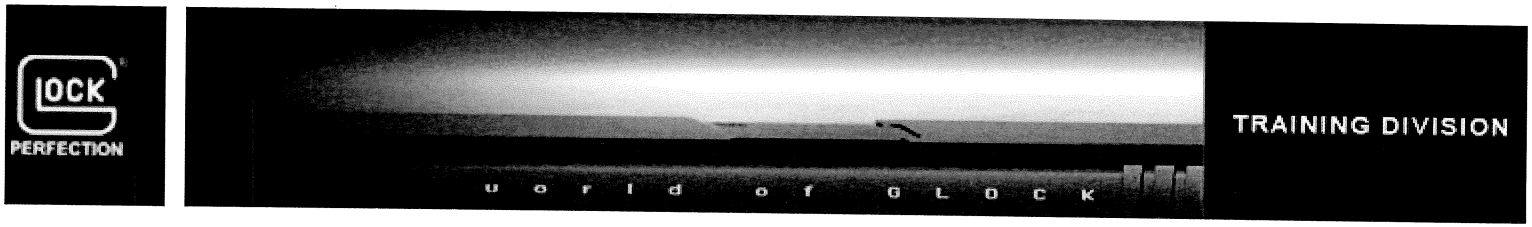
Total: 250.00 (USD)

Payment Information

Date/Time:	5-Jan-2016 15:28:01 EST
Transaction ID:	7861602978
Payment Method:	Visa xxxx1664
Transaction Type:	Purchase
Auth Code:	005637

Merchant Contact Information

GLOCK Professional, Inc.
Smyrna, GA 30082
US
training@glock.us



GLOCK reserves the right to remove students from classes and/or permanent ban from future training due to violation(s) of firearms safety rules with no refund of class fees.

REGISTRATION: NAME

CLASS INFO

Class 104149:	**2/2/2016 / Armorer's Course**
Price:	250.00 USD
Location:	Davison Shooting Club Andy Petersen, 3260 W Havens St - Mitchell, SD
Instructor:	Clark

Please note: if you have selected an Instructor's Workshop, you must be a Certified GLOCK Armorer and a state certified or NRA-LE Firearms Instructor. If you have any questions regarding eligibility please contact the training department at training@glock.us

STUDENT

* Please choose a category:

GLOCK Dealer | Range Program | LE Distributor | Security Officer
Active Law Enforcement | Retired Law Enforcement | Military | Other

Comment (e.g. name of Dealer/Distributor):

Title/Rank: * First Name: Middle Name: * Last Name:

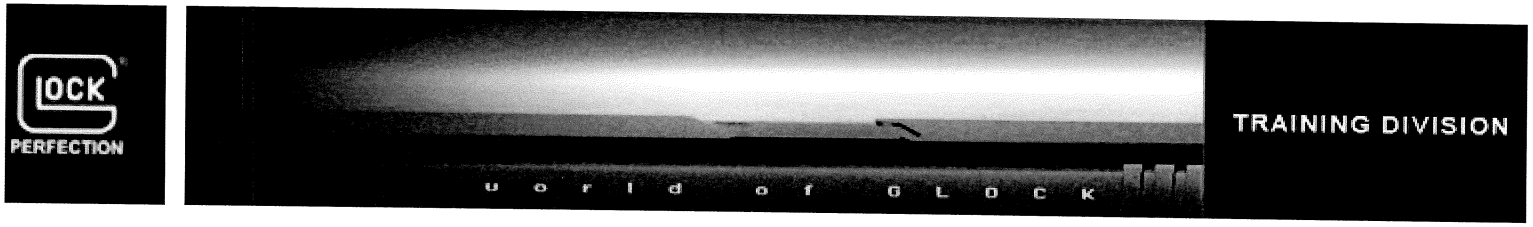
* U.S. citizen or U.S. permanent resident? yes no

If not, prior approval from U.S. Dept. of State is required.

* I must read the DSP-83 Form

DSP-83 approval could take up to 8 weeks, and is required if you are not a US citizen.
Please do not attempt to register for classes dated before approval can be obtained.

* I must read the Instructions for NON US Citizens
* I must read the Application Fees
* I am 21 or older



COURSE DESCRIPTION

These courses do not certify anyone as a firearms instructor and graduates cannot teach others GLOCK factory classes.

AC - ARMORERS COURSE (1 DAY)

Learn how to safely use and maintain your weapon in a one day (8 hour) class.
(To be eligible to take the Armorers Course you must be an active/retired law enforcement or military officer, private security, GLOCK Stocking Dealer/Range Program Employee or current GSSF member.)

IW - INSTRUCTORS WORKSHOP (2.5 DAYS)

Learn how to train other people in a three day (20 hours) class.
You are eligible to take the Instructors Workshop if you are:

- A current Glock Armorer
- A Police/Military Firearms Instructor
- Licensed/Armed Security Firearms Instructor
- NRA-LE Certified Firearms Instructor

Supporting documentation will be required for approval. If you have any questions regarding your eligibility please contact the Training Department at training@glock.us

G18 - GLOCK MODEL 18 SELECT-FIRE PISTOL COURSE (1 DAY)

One day (8 hour) class with suggestions of how to familiarize law enforcement officers with the G18 pistol.
(Current armorers whose agency issue the G-18 pistol are eligible for the G-18 (Select Fire) Course.)

AA - ADVANCED ARMORERS COURSE (2 DAYS)

Two day (16 hour) class that goes beyond the basic armorers course and discusses advanced maintenance and service issues for the GLOCK pistol.
(Current armorers with at least 2 years experience are eligible for the Advanced Armorers Course (AA).)

Brookings County

Travel/Education Request Form

Name(s) Sonia Mack

Department Extension/4-H Position: 4-H Youth Program Advisor

Travel/Education

Date(s)	Beginning Odometer	Ending Odometer	Destination
2/8/2016			Watertown, SD

Reason for Travel: Watertown Winter Farm Show (judge)

Passengers:

Estimated Expenses:

- Method of Travel: ___ County Vehicle XX Private Auto

  116 Miles @ $ .42 /per mile = $ 48.72

- Meals: ___ Breakfast @ $ _____ = $
  __ Lunch @ $ _____ = $
  __ Dinner @ $ _____ = $

  Employees will not be reimbursed for meals that are included in the registration fee.

- Additional Expenses (taxi, parking, etc):
  Please list _____ = $ _____

- Lodging: __ Estimated number of days/nights = $ _____

- Registration _____ Estimated cost = $ _____

Total Cost Estimate =

Department Head designated mileage rate: $ .42 /per mile

- A travel advance form is attached to this request yes_____ no XX

Department Head Signature

January 8, 2016
Date

Brookings County

Travel / Education Request Form

Name(s) Michael Gengler

Department Brookings Co. SO. Position(s) Deputy Sheriff

Travel/Education

Date(s)	Beginning Odometer	Ending Odometer	Destination
02/08-02/12/16			Pierre

Reason for Travel Instructor Development

Passengers _____

Estimated Expenses

- *Method of Travel:* X *County Vehicle* ____ *Private Auto*

  ____ miles @ $____/*per mile* = $ 75.00

- *Meals:* 0 *Breakfast* @ $ _____ = $ 0
  0 *Lunch* @ $ _____ = $ 0
  0 *Dinner* @ $ _____ = $ 0

- *Additional Expenses (taxi, parking, etc)*
  Please list _____ = $ 0

- *Lodging:* 0 *Estimated number of days/nights* = $ 0

- *Registration* 0 *Estimated cost* = $ 0

Total Cost Estimate = $ 75.00

Department Head designated mileage rate: $____/*per mile*

[signature] 1-14-16

Department Head Signature *Date*

Instructor Development

Start Date/Time:	Monday, February 08, 2016
End Date/Time:	Friday, February 12, 2016
Importance:	Normal Priority
Location:	Pierre
Description:	

APPLICATION

This is an interactive course designed to prepare individuals to determine training needs, and then develop, implement, and evaluate meaningful training for their department. Attendees learn the key to effective training is to focus on their trainees and prepare to meet those needs.

Pre-class articles and a journal will be provided to students before the class. Students will produce two final projects. The first project will be a non-Law Enforcement topic lesson plan and presentation. The second project will be a Law Enforcement topic lesson plan prepared to the same standards as the first project, developed by student groups and furnished to all students on completion.

The concept for the second project is to make law enforcement lesson plans available to more officers and increase agencies ability to develop their own lesson plans.
Topics include: adult learning, strategies for using Multiple Intelligences, Emotional Intelligences, and Blooms Taxonomy to increase participant learning, training needs assessment, instructional methods, Problem Based Learning, instructional objectives, course outlines, lesson plan development, testing & evaluation, presentation techniques, student presentations, and development of a training lesson relevant to each individual's future teaching assignments. This course is presented by Gerri Ann Eide.

Gerri Ann Eide: I attained my BS in Agriculture Education & Agricultural Journalism and MEd in Career & Technical Education from South Dakota

State University. I am a leadership and educational trainer with 20 years of experience. Through the years, I've attended exceptional, challenging educational training sessions that forever changed my knowledge and perceptions. But like many of you, I have also attended boring, poorly executed trainings I forgot as I left the room. I gained nothing and was utterly frustrated about the waste of time. I'm dedicated as a trainer to helping others learn and implement effective educational and facilitation techniques. Through GANE Leadership Consulting, I tailor the training to meet the specific needs of attendees, growing their effectiveness as leaders, facilitators and trainers. Training in Emotional Intelligences, Multiple Intelligences, adult learner needs, and Problem Based Learning continually come into play as I guide individuals to teach and facilitate exceptionally.

Lodging and Meals provided by LET.

App. was emailed to Pierre on 12/23/15 by Sgt. Jim Pike

STATE OF SOUTH DAKOTA

LAW ENFORCEMENT STANDARDS AND TRAINING COMMISSION

DIVISION OF CRIMINAL INVESTIGATION
GEORGE S. MICKELSON CRIMINAL JUSTICE CENTER
1302 E. HIGHWAY 14, STE. 5
PIERRE, SOUTH DAKOTA 57501-8505

MARTY J. JACKLEY
ATTORNEY GENERAL

APPLICATION TO ATTEND
SOUTH DAKOTA LAW ENFORCEMENT OFFICERS TRAINING COURSES

Type of Course Instructor Development

Course Date Monday, February 8th, 2016 to Friday, February 12th, 2016

Name Gengler (Last) Michael (First) J. (Middle) **(Please print or type)**

Date of Birth 12/21/88 SSN 504155686 ☑ M ☐ F Law Enforcement Service 2 yrs. 11 Mos.

Email address mgengler@brookingscountysd.gov Cell Phone # 605-254-5555

Name of Department Brookings County Sheriff's Office Phone # 605-696-8300

Department Mailing Address 315 7th Ave. (Address) Brookings (City) 57006 (Zip)

I request that you accept this nominee as the official representative of the Law Enforcement Agency headed by me. I do hereby agree that this representative will abide by all such rules and regulations pertaining to classroom and dormitory conduct and any serious breach of same may result in the dismissal of the violator. I further agree that the Law Enforcement Training Center, either individually or collectively, shall in no way be responsible for any accidents while this representative is en route to, attending any session of, or returning to their department. In addition, I agree that this representative shall attend the full course of instruction. **Application should be made no later then 45 days prior to the course.**

Due to the nature of some of the training offered, enrollment in a school may be limited. **Please do not assume that the applicant has been accepted for this school until you have received official confirmation from the Law Enforcement Training Office.**

Deputy Sheriff
(Title of Applicant)

12/23/15
(Date)

[signature] SHERIFF
(Name & Title of Department Head)

12/23/15
(Date)

This application form must be completed in its entirety and forwarded to the Law Enforcement Training Office.

☐ **I hereby certify my application has been approved by my supervisor/department head.**

Return this Application to:

Law Enforcement Training
Criminal Justice Center
1302 E. Hwy 14, Ste. 5
Pierre SD 57501-8505
Phone: 605-773-3584
Fax: 605-773-7203

Brookings County

Travel/Education Request Form

Name(s) Stacy Steffensen and Robert W. Hill

Department Commission/County Development Position Director

Travel/Education

Date(s)	Beginning Odometer	Ending Odometer	Destination
2/10/2016			Sioux Falls, SD

Reason for Travel:

Attend Social Media for Natural Disater Response and Recovery (PER-304).

Passengers: 1

Estimated Expenses:

•Method of Travel: ☑ County Vehicle ☑ Private Auto ☐ Air

110 Miles $ /mile =$ 0.00

•Meals:

0	Breakfast @	$ 6.00	=$	0.00
2	Lunch @	$ 11.00	=$	22.00
0	Dinner @	$ 15.00	=$	0.00

Employees will not be reimbursed for meals that are included in the registration fee.

•Additional Expenses (taxi, parking, etc.):

Please list None =$

•Lodging: 0 Estimated number of days/nights =$

•Registration: 0 Estimated Cost =$

Total Cost Estimate =$ 22.00

•Department Head designated mileage rate: $ 0.00 /mile

•A travel advance form is attached to this request ☐ Yes ☑ No

Robert W. Hill

Department Head Signature

1-07-2016

Date

Robert Hill

Subject:	Social Media (PER-304) (Bob)
Location:	Sioux Falls, SD
Start:	Wed 2/10/2016 7:00 AM
End:	Wed 2/10/2016 6:00 PM
Recurrence:	(none)
Meeting Status:	Meeting organizer
Organizer:	Robert Hill
Required Attendees:	[redacted]
Categories:	Needs Preparation

This is to confirm your registration for the following NDPTC course:

Date Registered: Oct 27, 2015

Participant: Robert Hill
Course: Social Media for Natural Disaster Response and Recovery (PER-304)
Course Date(s): Feb 10, 2016
Time: 08:00 a.m. - 05:00 p.m. (US/Central)

Location: Sioux Falls, South Dakota

Additional Information:

- You must complete the online Pre-test prior to the start of the class. Click on the link to take the test: https://ndptc.hawaii.edu/training/test/28893/PRE
- Please go to the My Courses page under the Training tab to view course logistics and to download the appropriate course materials.

Mahalo,
National Disaster Preparedness Training Center (NDPTC)

If you are unable to attend, please cancel your registration at our website here: https://ndptc.hawaii.edu/training/cancel/28893 or contact us at the email below.
Do NOT reply to this message as this email address does not accept incoming email.

Website: https://ndptc.hawaii.edu
Email: ndptc-training@lists.hawaii.edu

Brookings County

Travel / Education Request Form

Name(s) Misty Moser

Department Weed department Position Weed & Pest Supervisor

Travel / Education

Date(s)	Beginning Odometer	Ending Odometer	Destination
2-11-2016			Sioux Falls SD

Reason for Travel Gopher recertification

Passengers Mike Anderson, Gary Egeberg, Craig Chapman, Misty Moser

Estimated Expenses

- Method of Travel: X County Vehicle ____ Private Auto

  ____ miles @ $____ / per mile = $____

- Meals: 0 Breakfast @ $____ = $____
  0 Lunch @ $____ = $____
  0 Dinner @ $____ = $____

- Additional Expenses (taxi, parking, etc):
  Please list ____ = $____

- Lodging: ____ Estimated number of days/nights = $____

- Registration ____ Estimated cost = $____

Total Cost Estimate = $ 0

Department Head designated mileage rate: $____/per mile

Misty Moser
Department Head Signature

1-8-16
Date

031400

Brookings County

Travel / Education Request Form

Name(s) Misty Moser

Department Weed & Pest Department. Position Weed & Pest Supervisor

Travel / Education

Date(s)	Beginning Odometer	Ending Odometer	Destination
2-12-16			Watertown SD

Reason for Travel Assist at Watertown Farm & Home Show SDDA Weed Booth.

Passengers Misty Moser

Estimated Expenses

- Method of Travel: X County Vehicle ____ Private Auto

  ____ miles @ $____ / per mile = $____

- Meals: ____ Breakfast @ $____ = $____
  X Lunch @ $ 11.00 = $ 11.00
  ____ Dinner @ $____ = $____

- Additional Expenses (taxi, parking, etc):
  Please list ____ = $____

- Lodging: ____ Estimated number of days/nights = $____

- Registration ____ Estimated cost = $____

Total Cost Estimate = $ 11.00

Department Head designated mileage rate: $____/per mile

Misty Moser — Department Head Signature

1-8-16 — Date

031400

Brookings County

Travel/Education Request Form

Name(s) Robert W. Hill

Department County Development Position Director

Travel/Education

Date(s)	Beginning Odometer	Ending Odometer	Destination
3/7-~~8~~/2016			Sioux Falls, SD

Reason for Travel:

Attend G-108 Mas Care in Sioux Falls, SD.

Passengers: 1

Estimated Expenses:

•Method of Travel: ☑ County Vehicle ☑ Private Auto ☐ Air

110 Miles $ /mile =$ 0.00

•Meals:

0 Breakfast @ $ 6.00 =$ 0.00

~~2~~ 1 Lunch @ $ 11.00 =$ 22.00

0 Dinner @ $ 15.00 =$ 0.00

Employees will not be reimbursed for meals that are included in the registration fee.

•Additional Expenses (taxi, parking, etc.):

Please list None =$

•Lodging: 0 Estimated number of days/nights =$

•Registration: 0 Estimated Cost =$

Total Cost Estimate =$ 22.00

•Department Head designated mileage rate: $ 0.00 /mile

•A travel advance form is attached to this request ☐ Yes ☑ No

Robert W. Hill

Department Head Signature

1-07-2016

Date

4819751236081524180 01

Event

G108 Mass Care-Sioux Falls

Eventbrite

Date+Time

Monday, March 7, 2016 from 8:00 AM to 5:00 PM (CST)

Location

American Red Cross Building
808 N West Ave
Sioux Falls SD

Name

Robert Hill

Payment Status

Free Order

Order Info

Order #481975123. Ordered by Robert Hill on January 7, 2016 3:36 PM

Type

G108 Mass Care-Sioux Falls

48197512360815241800 1

Eventbrite

Do you organize events?

Start selling in minutes with Eventbrite!
www.eventbrite.com

Brookings County

Travel/Education Request Form

Name(s) Richard Haugen

Department Cointy Development/Emergency Mngmt Position Deputy Director

Travel/Education

Date(s)	Beginning Odometer	Ending Odometer	Destination
March 9-10, 2016			Sioux Falls, SD

Reason for Travel:

Attend FEMA G386 Mass Fatality training in Sioux Falls, SD

Passengers:

Estimated Expenses:

•Method of Travel: ☑ County Vehicle ☐ Private Auto ☐ Air

240 Miles $ /mile =$ 0.00

•Meals:

Breakfast @ $ =$ 0.00

2 Lunch @ $ 11.00 =$ 22.00

Dinner @ $ =$ 0.00

Employees will not be reimbursed for meals that are included in the registration fee.

•Additional Expenses (taxi, parking, etc.):

Please list =$

•Lodging: Estimated number of days/nights =$

•Registration: Estimated Cost =$

Total Cost Estimate =$ 22.00

•Department Head designated mileage rate: $ /mile

•A travel advance form is attached to this request ☐ Yes ☐ No

Department Head Signature

1-08-2016

Date

Event

G386 Mass Fatality-Sioux Falls

Eventbrite

482181247608404713001

Date+Time

Wednesday, March 9, 2016 at 8:00 AM - Thursday, March 10, 2016 at 5:00 PM (CST)

Location

American Red Cross Building
Training Room
808 N West Ave
Sioux Falls SD

Name

Richard Haugen

Payment Status

Free Order

Order Info

Order #482181247. Ordered by Richard Haugen on January 8, 2016 11:54 AM

Type

G386 Mass Fatality-Sioux Falls

482181247608404713001

Eventbrite

Do you organize events?

Start selling in minutes with Eventbrite!
www.eventbrite.com

Brookings County

Travel/Education Request Form

Name(s) Robert W. Hill

Department County Development Position Director

Travel/Education

Date(s)	Beginning Odometer	Ending Odometer	Destination
3/15/2016			Pierre, SD

Reason for Travel:

Attend G-366 Planning for Needs of Children in Disaster. Will depart from Brookings at 4 a.m. and return after the training at 5 p.m.

Passengers: 0

Estimated Expenses:

•Method of Travel: ☑ County Vehicle ☐ Private Auto ☐ Air

384 Miles $ /mile =$ 0.00

•Meals:

0 Breakfast @ $ 6.00 =$ 0.00

0 Lunch @ $ 11.00 =$ 0.00

0 Dinner @ $ 15.00 =$ 0.00

Employees will not be reimbursed for meals that are included in the registration fee.

•Additional Expenses (taxi, parking, etc.):

Please list None =$

•Lodging: 0 Estimated number of days/nights =$

•Registration: 0 Estimated Cost =$

Total Cost Estimate =$ 0.00

•Department Head designated mileage rate: $ 0.00 /mile

•A travel advance form is attached to this request ☐ Yes ☑ No

Robert W. Hill

Department Head Signature

1-07-2016

Date

4819869936081667330 01

Event

G366 Planning for the Needs of Children in a Disaster-Pierre

Eventbrite

Date+Time

Tuesday, March 15, 2016 from 8:00 AM to 5:00 PM (CDT)

Location

George S Mickelson Criminal Justice Center
1302 Hwy 14
Classroom E
Pierre, SD 57501

Name

Robert Hill

Payment Status

Free Order

Order Info

Order #481986993. Ordered by Robert Hill on January 7, 2016 4:20 PM

Type

G366 Planning for the Needs of Children in a Disaster-Pierre

481986993608166733001

Eventbrite

Do you organize events?

Start selling in minutes with Eventbrite!
www.eventbrite.com

Brookings County

Travel / Education Request Form

Name(s) Manuel Langstraat

Department S.O Position(s) deputy

Travel/Education

Date(s)	Beginning Odometer	Ending Odometer	Destination
4/4-5/15			Mitchell PD

Reason for Travel TASER Instructor Training

Passengers _____

Estimated Expenses

- *Method of Travel:* X *County Vehicle* ____ *Private Auto*

  200 miles @ $.42/*per mile* = $ 84.00

- *Meals:* 2 *Breakfast* @ $ 6.00 = $ 12.00
  2 *Lunch* @ $ 22.00 = $ 22.00
  2 *Dinner* @ $ 15.00 = $ 30.00

- *Additional Expenses (taxi, parking, etc)*
  Please list _____ = $ 0

- *Lodging:* 1 *Estimated number of days/nights* = $ 89.00

- *Registration* 1 *Estimated cost* = $ 390.00

Total Cost Estimate = $ 627.00

Department Head designated mileage rate: $ ____/*per mile*

[signature] 1-6-16

Department Head Signature *Date*

Course Description:	View Course Description1
status:	Confirmed
Seats Remaining:	8
Instructor:	Mark Maloney - slppdsgt2@hotmail.com
Cancellation Policy:	View cancellation policy
Address:	201 W. 1st St. Mitchell SD 57301 USA
Venue Details:	Mitchell Police Department
Time Zone:	(GMT-07:00) Mountain Time (US & Canada)

TASER X26, X26P and X2 Instructor certification - This course will certify you to instruct others on the use of the X26, X26P AND X2 TASER Conducted Electrical Weapons and is a prerequisite for all TASER CEW certifications. Please be sure to follow the registration directions below.If enrollment is completed properly, an email confirmation will be sent to the student(s). If you are with a professional security or bail bonds company, you must first be approved to attend this course through the TASER Training department. Please view the waiver posted under the "Training" tab of www.TASER.com which outlines what documentation is required or click HERE.

What To Bring:
The dress is casual. Bring your department issued TASER holster (if applicable). Holsters will be available for those who need them. Please bring your duty belt with NO firearms, ammunition, or weapons of any kind.

Reminder:
You will not be able to access the online training portion until three weeks before the course dates. An email will be sent to you, reminding you of this. You are required to have it completed three days in advance of attending the course.

New certifications -complete the 4 hour online training block and attend BOTH days of the practical session.Re-certifications - complete the 8 hour online training block and attend the second listed practical date (Day 2 of the session). All payment arrangements are to be made during the online registration process. Enrollment will NOT be completed unless payment arrangements have been made. **The online coursework does not open until three weeks before the training dates. All online work is required to be completed no later than three days before those same training dates.**

Certificates will not be emailed to the student until payment has been received.

Transaction Id: 38846

Date of purchase: Jan 04 2016

Payment Method: Visa

Payor Name: Jon Pike

Total Sale: USD390.00

Student Name: Manuel Langstraat

Company: BROOKINGS COUNTY SHERIFF'S OFFICE-SD

Payee Company: Taser

Items Purchased

NEW TASER Instructor Course Version 20 **Date:** Monday, April 04, 2016 8:00:00 AM-- Tuesday, April 05, 2016 5:00:00 PM **Venue:** Mitchell Police Department No Of Attendees: 0	**USD390.00**
Total:	**USD390.00**

Brookings County

Travel/Education Request Form

Name(s) Robert W. Hill

Department County Development Position Director

Travel/Education

Date(s)	Beginning Odometer	Ending Odometer	Destination
4/01-05/2016			Phoenix, AZ

Reason for Travel:

Attend the National American Planning Association Planning Conference. Annual meeting of the National Association of County Planners (NACP) occurs during this conference.

Passengers: 0

Estimated Expenses:

•Method of Travel: ☐ County Vehicle ☑ Private Auto ☐ Air

110 Miles $ 0.42 /mile =$ 46.20

•Meals:

4 Breakfast @ $ 10.00 =$ 40.00

4 Lunch @ $ 14.00 =$ 56.00

4 Dinner @ $ 21.00 =$ 84.00

Employees will not be reimbursed for meals that are included in the registration fee.

•Additional Expenses (taxi, parking, etc.):

Please list Airfare, parking, shuttle =$ 470.00

•Lodging: 4 Estimated number of days/nights =$ 404.13

•Registration: 735.00 Estimated Cost =$ 735.00

Total Cost Estimate =$ 1,835.33

•Department Head designated mileage rate: $ 0.00 /mile

•A travel advance form is attached to this request ☐ Yes ☑ No

Robert W. Hill

Department Head Signature

1-07-2016

Date

American Planning Association
Making Great Communities Happen

American Planning Association's
National Planning Conference
April 2–5, 2016 • Phoenix

PHOENIX 2016 REGISTRATION FORM

Questions about APA's National Planning Conference registration policies?
Find answers at planning.org/conference/registration/policies.

NAME AND ADDRESS *(PLEASE PRINT)*

☐ Please check here if you are revising a previously submitted registration.

ID NUMBER: 140575

FIRST NAME: Robert | M.I.: W. | LAST NAME: Hill

HOME ADDRESS:

CITY: | STATE: | ZIP:

EMPLOYER/SCHOOL NAME: Brookings County | DEPT.: County Development Department

EMPLOYER/SCHOOL ADDRESS: 520 3rd St | SUITE #: 210

CITY: Brookings | STATE: SD | ZIP: 57006

FIRST NAME ONLY (FOR BADGE): Robert

HOME PHONE: 605 696 8350

OFFICE PHONE: | FAX NUMBER:

EMAIL ADDRESS (REQUIRED: SEE NOTE ON FACING PAGE): rhill@brookingscountysd.gov

Preferred mailing address: ☐ Home ☒ Employer

Preferred billing address: ☐ Home ☒ Employer

STEP 1: JOIN APA NOW

Join APA now and you'll save up to $315 on conference registration. You'll qualify for the member conference price. Go to planning.org/join, follow the onscreen instructions, and make a note of your APA ID. (It will appear on the confirmation screen and be emailed to you.)

STEP 2: BASIC REGISTRATION

CIRCLE the rate option that fits your current membership category and registration date. Register online and save! A $50 paper-processing fee applies to each mailed or faxed registration. You need an ID to register. Members use the ID found on your *Planning* label or APA invoice. Nonmembers, create an ID online.

FULL CONFERENCE RATES

Includes awards luncheon invitation, opening reception, Exhibitors' Meet and Greet, and PowerPoint presentations from speakers (post conference). Rate applies to individuals only, not agencies.

Payment must be received by:	Feb. 4	Mar. 3	Late Rate
APA Members and Speakers	$735	$785	$835
Nonmembers	$1,050	$1,050	$1,050
Nonmember Planning Officials	$735	$840	$890
COMPLIMENTARY REGISTRATION Registration code required _____	FREE	FREE	N/A

DISCOUNTED CONFERENCE RATES

Includes Exhibitors' Meet and Greet, and PowerPoint presentations from speakers (post conference). TICKETS MAY BE PURCHASED for the awards luncheon and opening reception, but they are not included with discounted registration. Nonmember students must pay the nonmember registration rate.

Payment received by:	Feb. 4	Mar. 3	Late Rate
Life, Retired, Early Career Membership Program (student and new professional) members	$125	$145	$165

Step 2: Basic Registration Subtotal $_____

Brookings County

Travel/Education Request Form

Name(s) Laura Littlecott

Department Commission Position HR Specialist

Travel/Education

Date(s)	Beginning Odometer	Ending Odometer	Destination
April 13-15, 2016			Brookings

Reason for Travel:

South Dakota SHRM State Conference

Passengers: _____

Estimated Expenses:

•Method of Travel: ☐ County Vehicle ☐ Private Auto ☐ Air

_____ Miles $ _____ /mile =$ 0.00

•Meals: _____ Breakfast @ $ _____ =$ 0.00

_____ Lunch @ $ _____ =$ 0.00

_____ Dinner @ $ _____ =$ 0.00

Employees will not be reimbursed for meals that are included in the registration fee.

•Additional Expenses (taxi, parking, etc.):

Please list _____ =$ _____

•Lodging: _____ Estimated number of days/nights =$ _____

•Registration: $209 Estimated Cost =$ 209.00

Total Cost Estimate =$ 209.00

•Department Head designated mileage rate: $ _____ /mile

•A travel advance form is attached to this request ☐ Yes ☐ No

Stacy Jeffersen

Department Head Signature

1-13-16

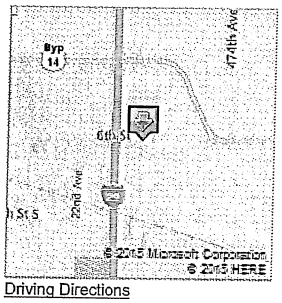
Date

When

Wednesday April 13, 2016 at 1:00 PM CDT
-to-
Friday April 15, 2016 at 1:00 PM CDT
Add to Calendar

Where

Swiftel Center
824 32nd Ave
Brookings, SD 57006



Driving Directions

Contact

Jennifer Klingbile
SD SHRM & BAHRA
605-690-3161
brookingshr@gmail.com

Start Your Engine

The South Dakota SHRM State Council, along with the Brookings Area South Dakota SHRM chapter, are delighted to host this year's State SHRM Conference in Brookings, South Dakota. The conference will be held at the Swiftel Center in Brookings, South Dakota.

You have successfully registered for the 2016 South Dakota State SHRM Conference; look for a confirmation email arriving shortly.

If you are paying by check, you will receive additional information on where to send it to for processing.

Thanks for your interest!

Share this event on Facebook

Tweet that you're attending

Personal Information

First Name:	Laura
Last Name:	Littlecott
HR CERTIFICATION?	None
Email Address:	llittlecott@brookingscountysd.gov

Business Information

Company:	Brookings County
Job Title:	HR Specialist
Address 1:	520 3rd St
City:	Brookings
State:	South Dakota
ZIP Code:	57006
Phone:	6056968205

Additional Member & Miscellaneous Information

Are you a member of a SHRM affiliate chapter?	No
Are you a National SHRM member?	No
Are you requesting any accommodations (physical, meals, etc.)?	No

Concurrent Sessions & Social

The following questions are being asked to help with conference pre-planning. Your answers will provide us with approximate numbers of attendees for each concurrent session and the social events and can be changed once you arrive at the conference.

Breakout Session #1 (Thursday 10:30 am - 11:30 am)	Where Do We Go From Here? A Roadmap To Complying With Recent Guidance From The DOL - Jean Bender
Breakout Session #2 (Thursday 1:00 pm - 2:00 pm)	Why Do They Keep Moving The Speed Bumps? Hot Topics in HR - Steve Bogue
Breakout Session #3 (Thursday 2:00 pm - 3:00 pm)	Where Do We Go From Here? The Future Of The ACA - Autumn Long
Will you be attending Wednesday evening's social at McCrory Gardens?	Yes
If yes, will you be bringing a guest? No additional cost.	Yes
Will you be attending the Thursday evening dinner featuring Interactive Dueling Pianos?	Yes
If yes, will you be bringing a guest? Cost is $25.00 per person.	No

CANCELLATION POLICY: * 50% refunded if cancellation received by 3/30/16 * No refunds after 3/30/16 * Cancellation must be in writing and sent to: brookingshr@gmail.com (confirmation of cancellation will be sent)

Payment Summary

Payment Method

Pay By Check

Please make check payable to:
South Dakota SHRM
c/o BAHRA
Deanna Vaske
609 Main Avenue S
Brookings, SD 57006

Name	*Type*	*Quantity*	*Fee*	*Total*
Laura Littlecott	Conference Registration (Select "Pay by Check" option under Payment)	1	$209.00	$209.00
		TOTAL:		$209.00

Brookings County

Travel / Education Request Form

Darren DeJong

Name(s) _____

Department _____Sheriff's Office___ Position(s) ____Corrections Sergeant_____

Travel/Education

Date(s)	Beginning Odometer	Ending Odometer	Destination
April 18-20, 2016			Sioux Falls, SD

Reason for Travel _____Attend National Drug Court Intitute – Adult Drugs Court Planning Initiative__

_____

Passengers _____

Estimated Expenses

- *Method of Travel:* ___X_ *County Vehicle* ____ *Private Auto*

  120__ miles @ *$_.42_/per mile* = $ ____50.40_____

- *Meals:* ___2_ *Breakfast* @ *$___6.00____* = $ ____12.00_____
  ___3_ *Lunch* @ *$ __11.00___* = $_____33.00_____
  ___2_ *Dinner* @*$___30.00___* = $ ____60.00_____

- *Additional Expenses (taxi, parking, etc)*
  Please list _____ = $ _____

- *Lodging:* __2__ *Estimated number of days/nights* = $ ____110.00_____

- *Registration* _____ *Estimated cost* = $ _____

Total Cost Estimate = $ _____265.40_____

Department Head designated mileage rate: $ _____*/per mile*

Martin E Starnes 1-13-16

Department Head Signature *Date*

National Drug Court Intitute
Adult Drug Court Planning Initiative

Pre-Training Online Course Modules:

- *Co-Occurring Disorders*
- *Relapse*
- *Drug Testing*
- *Introduction to Addiction / Psychopharmacology*
- *Assessment, Treatment and Continuum of Care*

DAY ONE

8:30 a.m.-9:00 a.m.	**Welcome and Introductions**
9:00 a.m.-10:00 a.m.	**Plenary:** *Ten Key Components of Adult Drug Courts*
10:00 a.m. – 10:15 a.m.	**Break**
10:15 a.m. – 12:00 p.m.	**Plenary:** *Multi-Disciplinary Team*
12:00 p.m. –1:15 p.m.	**Lunch on your own**
1:15 p.m.- 2:30 p.m.	**Plenary:** *Identifying the Drug Court Population*
2:30 p.m.-2:45 p.m.	**Break**
2:45 p.m.-4:00 p.m.	**Jurisdictional Breakout:** *Determining the Drug Court Structure, Target Population and Eligibility Criteria*
4:00 p.m.	**Adjourn**

DAY TWO

8:30 a.m. - 9:45 a.m.	**Jurisdictional Breakout:** *Developing a Drug Court Entry Process*
9:45 a.m.-10:00 a.m.	**Break**
10:00 a.m.-11:45 a.m.	**Jurisdictional Breakout:** *Defining Treatment and Continuum of Care Model*
11:45 a.m. – 1:00 p.m.	**Lunch on your own**
1:00 p.m. – 2:00 p.m.	**Plenary:** Community Supervision
2:00 p.m.-2:15 p.m.	**Break**

DRAFT

2:15 p.m. – 3:15 p.m.	**Plenary:** *Adult Drug Court Phases and Court Requirements*
3:15 p.m.-3:30 p.m.	**Break**
3:30 p.m. - 5:00 p.m.	**Jurisdictional Breakout:** *Defining Phases and Court Requirement, Community Supervision and Drug Testing*
5:00 p.m.	**Adjourn**

DAY THREE

8:30 a.m. – 9:30 a.m.	**Plenary:** *Responses to Client Behavior*
9:30 a.m. – 9:45 a.m.	**Break**
9:45 a.m. – 10:45 a.m.	**Plenary:** *Sustainability*
10:45 a.m. – 11:00 a.m.	**Break**
11:00 a.m. – 12:00 p.m.	**Parking Lot and Action Plan**
12:00 p.m. – 12:30 p.m.	**Training Review and Follow-Up Scheduling**

DRAFT

Brookings County

Travel/Education Request Form

Name(s) Robert W. Hill, Richard Haugen

Department County Development Position Director/Deputy Director

Travel/Education

Date(s)	Beginning Odometer	Ending Odometer	Destination
9/12-15/2016			Aberdeen, SD

Reason for Travel:

Attend the annual South Dakota Emergency Management Conference in Aberdeen, SD. Annual SDOEM Region VI meeting is also held during this conference.

Passengers: 1

Estimated Expenses:

•Method of Travel: ☑ County Vehicle ☑ Private Auto ☐ Air

300 Miles $ /mile =$ 0.00

•Meals:

6 Breakfast @ $ 6.00 =$ 36.00

8 Lunch @ $ 11.00 =$ 88.00

6 Dinner @ $ 15.00 =$ 90.00

Employees will not be reimbursed for meals that are included in the registration fee.

•Additional Expenses (taxi, parking, etc.):

Please list None =$

•Lodging: 3 Estimated number of days/nights =$ 539.94

•Registration: $90.00 Estimated Cost =$ 90.00

Total Cost Estimate =$ 843.94

•Department Head designated mileage rate: $ 0.00 /mile

•A travel advance form is attached to this request ☐ Yes ☑ No

Robert W. Hill

Department Head Signature

1-13-2016

Date

SOUTH DAKOTA
EMERGENCY MANAGEMENT ASSOCIATION

411 2nd Ave. East, Sisseton, SD 57262
Phone: (605-880-0311) Fax: (605-698-4277)
Email: roberts.co.em@venturecomm.net

SDEMA Membership Application

MEMBERSHIP-- Applications DUE April 15, 2016

X Membership: ☐ **New OR** **X Renewal** - $30.00-Individual members

☐ **Corporate Sponsor** - $75.00 – Companies or agencies (as a whole) also those companies that desire to be vendors at the annual conference if paid by July 1st.
AFTER July 1st - $150.00.

☐ **Lifetime Membership** – Determined by SDEMA – No Membership dues.

CONFERENCE

The 2016 conference will take place on September 12-15 at the Ramkota in Aberdeen, 1400 8th Avenue NW, Aberdeen, SD. Reservation number is 605-229-4040 – Fax 605-229-0480

X Conference Registration - $30.00 per person, including lifetime members.

X Conference Banquet - $15.00 per person, including lifetime members. ***Non-Refundable***

TOTAL ENCLOSED: **$ 75.00**

All applicants, NEW, Renewal or Lifetime Member, please complete this form each year to help keep our records updated. Please fill out a separate form for each member.

Name	Robert W. Hill		
Mailing Address	520 3rd Street, Suite 210		
City, State, Zip	Brookings	SD	57006
County	Brookings	Region	VI
Email	rhill@brookingscountysd.gov		
Office Phone	605-692-5212	Cell Phone	605-690-5041
Employer/Agency	Brookings County		
Position/Title	Emergency Manager / County Development Department Director		

TAX ID# 23-7057062
REMIT Application and payment to:
SDEMA – c/o Jim Pearson
411 2nd Ave. East, Sisseton, SD 57262

If no payment is required, return by email to
roberts.co.em@venturecomm.net

SOUTH DAKOTA
EMERGENCY MANAGEMENT ASSOCIATION

411 2nd Ave. East, Sisseton, SD 57262
Phone: (605-880-0311) Fax: (605-698-4277)
Email: roberts.co.em@venturecomm.net

SDEMA Membership Application

MEMBERSHIP-- Applications DUE April 15, 2016

X Membership: ☐ **New OR** **X Renewal** - $30.00-Individual members

☐ **Corporate Sponsor** - $75.00 – Companies or agencies (as a whole) also those companies that desire to be vendors at the annual conference if paid by July 1st.
AFTER July 1st - $150.00.

☐ **Lifetime Membership** – Determined by SDEMA – No Membership dues.

CONFERENCE

The 2016 conference will take place on September 12-15 at the Ramkota in Aberdeen, 1400 8th Avenue NW, Aberdeen, SD. Reservation number is 605-229-4040 – Fax 605-229-0480

X Conference Registration - $30.00 per person, including lifetime members.

X Conference Banquet - $15.00 per person, including lifetime members. ***Non-Refundable***

TOTAL ENCLOSED: **$ 75.00**

All applicants, NEW, Renewal or Lifetime Member, please complete this form each year to help keep our records updated. Please fill out a separate form for each member.

Name	Richard Haugen		
Mailing Address	520 3rd Street, Suite 200		
City, State, Zip	Brookings	SD	57006
County	Brookings	Region	VI
Email	rhill@brookingscountysd.gov		
Office Phone	605-696-8350	Cell Phone	605-530-0193
Employer/Agency	Brookings County		
Position/Title	Deputy Emergency Manager / County Development Department Deputy Director		

TAX ID# 23-7057062
REMIT Application and payment to:
SDEMA – c/o Jim Pearson
411 2nd Ave. East, Sisseton, SD 57262

If no payment is required, return by email to
roberts.co.em@venturecomm.net