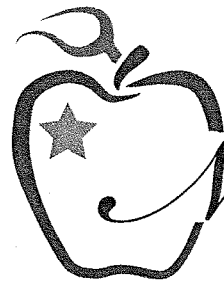


2016-2017



Missouri Regional Teacher of the Year

Nomination Form

Eligibility Requirements

The nominee must be a certified, full-time, public or charter school educator. All Pre-K through 12 classroom teachers, career and technical educators, guidance counselors, and library media specialists (or holding a similar position) who are actively engaged in classroom teaching are eligible for this recognition.

- Jan. 1, 2016 The nomination period opens
- April 15, 2016 The nomination period closes
- May 12, 2016 Teacher of the Year Application Clinic is held
- June 15, 2016 2016 Missouri Regional Teacher of the Year Applications are due
- June 16-July 17, 2016 2016 Missouri Regional Teacher(s) of the Year are selected
- July 31, 2016 Missouri State Teacher of the Year Application period closes. Completed applications must be postmarked (regular mail) and also emailed (electronic copy) by 5:00 p.m.

I would like to nominate: (complete all fields)

Educator's Name: _____ School Phone: _____

Name of School District or Charter School: _____

School Name: _____

School Street Address: _____

City: _____ State: _____ Zip Code: _____

Major Subject Taught: _____ Grade Level: _____

In 300 words or less, explain why you believe the educator you are nominating should be the Regional Teacher of the Year, citing specific examples. Some things to consider are the teacher's methods for meeting student needs, desire for professional growth, community involvement, dedication to the teaching profession, and rapport with students, parents and staff.

Nominator (complete all fields)

Your Full Name: _____ Daytime Phone: _____

Street Address: _____

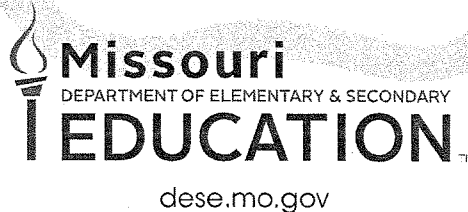
City: _____ State: _____ Zip Code: _____

Email Address: _____

Indicate how you know the Nominee.

- I teach in the same building or district.
- I am a student or former student of the nominee.
- I am a parent/grandparent/custodial parent of a student in the nominee's classroom (present or past).
- I have worked with the nominee in community organizations or functions.
- I am the nominee's supervisor (principal, superintendent, assistant principal, assistant superintendent, etc.).
- I serve as a member of the district Board of Education.
- I am a neighbor or friend but do not work with the nominee.
- Other _____

Email completed nomination form to linda.dooling@dese.mo.gov.



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Nomination Period Opens January 1, 2016 and Closes April 15, 2016