



## Superintendent and Administrator of the Year – 2020

### State Affiliate Nominee Application Form

To Be Completed by the Nominee Selected by the State Affiliate

#### Contact Information – Personal

Prefix First Name Middle Initial Last Name Suffix

Personal Phone Number Personal E-Mail

#### Contact Information – District

Current Position District Name

District Address – Street City State Zip

District Phone Nominee District E-Mail

#### Contact Information School (if applicable)

School Name

School Address – Street City State Zip

School Phone School Fax Nominee School E-Mail

## Personal Information

**Professional Experience** (List by most recent, excluding current position/school)

Position	Name and Locations of District/School	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Total Number of Years as a Superintendent/Administrator** \_\_\_\_\_

**Total Number of Years in Current Position/School** \_\_\_\_\_

TO BE COMPLETED BY NOMINEE

**Professional Preparation** (List by most recent)

Degree	Name and Location of Institution	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

### District and School Information (To be completed as applicable)

\_\_\_\_\_  
 Name of School District Name of School

\_\_\_\_\_  
 School District Superintendents Name District Phone Number

\_\_\_\_\_  
 School District Superintendents Address School Superintendent's E-Mail

**School District Setting (check one)**       Urban       Suburban       Small Town       Rural

**School District Enrollment:** \_\_\_\_\_ **Students Receiving Free/Reduced Price Meals:** \_\_\_\_\_ %



**School District Ethnic/Racial Composition:**

_____ % American Indian/Alaskan Native	_____ % Asian
_____ % African- American/Black	_____ % Hispanic/Latino
_____ % Native Hawaiian/Pacific Islander	_____ % Caucasian/White

**School's Grade Configuration** (check one, if applicable)

Elementary School Nominee: \_\_\_\_\_  
(must include either pre-k, k, 1, 2, 3, or 4 though older students may attend as well)

Middle School or High School Nominee: \_\_\_\_\_  
(may NOT include pre-k, k, 1, 2)

TO BE COMPLETED BY NOMINEE

Nominee Name \_\_\_\_\_

**Professional Activities, Awards and Honors**

Name of Professional Association/Organization	Office Held/ Awards Received	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Service to the Community**

Name of Community Association/Organization	Office Held/Awards Received	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____





**Superintendent and Administrator of the Year  
Nominee Affirmation Statement**

I do hereby affirm that I plan on remaining in a position of school leadership during the 2019-2020 school year.

I do further affirm that the information included in this application packet is a fair and true representation of the facts of my professional career.

I do hereby grant my permission for any or all of the enclosed materials (including my photo but excluding my home address, home and/or cell phone number, and home e-mail address) to be shared with persons and organizations interested in promoting the ALAS Leaders in Education Awards and its honorees.

Printed Name of Nominee: \_\_\_\_\_

Nominee Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Submit your nomination by February 28, 2020 to ALAS via email to: [cpandurini@alasedu.org](mailto:cpandurini@alasedu.org)  
ALAS Awards Committee will announce receipts by March 13th, 2020.