



Special Citation School District/University

Nomination Form

Please type or print legibly. To type into this form you may click in the shaded areas, type your information, and print the completed form for mailing. Be sure to print before exiting the form; you will not be able to save changes you make to this PDF form.

Nomination Information (to be completed by nominator)

NOMINEE

Name of School District or University

Superintendent or College Dean

Principal, College Department Chair, or Other Contact

Address Line 1

Address Line 1

Address Line 2 (if any)

Address Line 2 (if any)

City, State, Zip

City, State, Zip

Phone

Phone

E-Mail/Web Site

E-mail

NOMINATOR

Name of Nominator

Phone

Address Line 1

E-Mail

Address Line 2 (if any)

City, State, Zip

Checklist of Requirements (to be completed by Region Chair)

- Nominator is a member in good standing
- Completed nomination form
- Letter from nominator with rationale for nomination (highlight support of art education and/or NYSATA)
- One additional letter of recommendation
- Signature of Region Chair (see below)
- All materials submitted to Region Chair by May 1
- All materials submitted to State Awards Chair by June 1

Signature of Region Chair

Region

Date