

Region Art Educator of the Year Award

Nomination Form

Please type or print legibly. To type into this form you may click in the highlighted fields, type your information, and print the completed form for mailing. Be sure to print before exiting the form in case you have trouble saving changes you make to this PDF form.

Nomination Information (to be completed by nominator)

NOMINEE	PRINCIPAL
Name of Nominee	Principal (or College Department Chair)
Address Line 1	School
Address Line 2 (if any)	School Address Line 1
City, State, Zip	School Address Line 2 (if any)
Phone	City, State, Zip
Primary E-Mail Alternate E-Mail	E-mail
SUPERINTENDENT	NOMINATOR
Superintendent (or College Dean)	Name of Nominator
School District (or College/University)	Address Line 1
Address Line 1	Address Line 2 (if any)
Address Line 2 (if any)	City, State, Zip
City, State, Zip	Phone
E-Mail	Primary E-mail Alternate E-Mail
Checklist of Requirements (to be completed by Region	Chair)
☐ Member in good standing expiration date	☐ Signature of Region Chair (see below)
□ Completed nomination form	☐ All materials submitted to Region Chair by April 1
☐ Letter from nominator with rationale for nomination	☐ All materials submitted to State Awards Chair by
☐ Two additional letters of recommendation	May 1 (contact information available at
□ NYSATA Standardized Vita completed	www.nysata.org/awards)
Signature of Region Chair	Region Date