

Special Citation Business or Institution 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)

N	OMINEE	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)
Ph	one Region	City, State, Zip
Pri	mary Email Alternate Email	Email
SI	UPERINTENDENT	NOMINATOR
Superintendent, College Dean, or Supervisor		Name of Nominator
School District /or College/University/Business		Address Line 1
Address Line 1		Address Line 2 (if any)
Address Line 2 (if any)		City, State, Zip
City, State, Zip		Phone
 Email		Alternate Email
Ch	ecklist of Requirements (to be completed by Awards	s Chair)
0	Completed nomination form Letter from nominator with rationale for nomination (Highlight support of art education and/or NYSATA)	 All materials submitted to State Awards Chair by May 1 (contact information available at www.nysata.org/awards) Materials incomplete Materials complete
	One additional letter of recommendation	
Reviewed by		Date: