

Special Citation School District/University 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		Scho	School		
Address Line 2 (if any)			School Address Line 1		
City, State, Zip			School Address Line 2 (if any)		
Dh	one Region	City	, State, Zip		
PII	one Region	City,	State, Zip		
Pr	imary Email Alternate Email	Ema	il		
SUPERINTENDENT			MINATOR		
Consciptor dant Callege Door, or Conscious			Name of Naminator		
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		
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City, State, Zip			Phone		
Email		Prim	nary Email	Alternate Email	
Checklist of Requirements (to be completed by Awards Chair)					
	Nominee is a member in good standing	П	All materials s	ubmitted to State Awards Chair by	
	Completed nomination form		May 1 (contact information available at www.nysata.org/awards)		
	Letter from nominator with rationale for nomination	_			
	(Highlight support of art education and/or NYSATA		Materials inco Materials com		
	One additional letter of recommendation		iviaterials colli	picto	
Reviewed by			Date:		