

**OAHPERD Administrator Award Nomination Form**

For the candidate to be considered the nominator needs to have this form completed along with the recommendation following the specified criteria. Please submit completed awards form in PDF format to OAHPERD Awards Chair, Stacey Slackford-Barnes - sslackford@aol.com

**Nominator Information**

|  |  |
| --- | --- |
| Name of person making the nomination: |  |
| Home Address:  |  |
| Home Email: |  |
| Phone Number: |  |
| School Address:  |  |
| School Phone: |  |
| School/Home Fax:  |  |
| IAHPERD Membership Number:  |  |
| IAHPERD District: |  |

**Administrator Nominee Information**

|  |  |
| --- | --- |
| Administrator’s Name: |  |
| Administrator’s Position: |  |
| Administrator’s E-Mail Address: |  |
| Administrator’s School Phone Number: |  |
| Administrator’s School District Name: |  |
| Administrator’s School Address: |  |
| School District’s Fax: |  |

**School District’s Public Relations Officer**

|  |  |
| --- | --- |
| **PR Officer Name:** |  |
| Email Address:  |  | Phone:  |  |
| Twitter Account: |  | Other social media: |  |

**If retired: Hometown/city Information.**

|  |  |
| --- | --- |
| Name of Town/City for Residency:  |   |
| Twitter Account: |  | Other social media: |  |

**Newspaper Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Newspaper #1:  |  | Editor:  |  |
| Address:  |  |
| Phone:  |  | FAX:  |  |
| Editor’s Email Address:  |  |
| Newspaper #2:  |  | Editor:  |  |
| Address:  |  |
| Phone:  |  | FAX:  |  |
| Editor’s Email Address:  |  |

**Other Media Outlets (If Applicable):**

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**Recommendation addresses a minimum of THREE CRITERIA OF THE SIX LISTED BELOW.**

1. How has this administrator been an outstanding advocate for you and your programs?
2. How has this administrator given you extraordinary support in your professional endeavors?
3. How has this administrator championed the cause of health, physical education and/or dance at the local and/or state level?
4. How has this administrator supported your program when there were possible serious cutbacks in staff or scheduling?
5. How has this administrator educated him/herself to the value of quality programs and has consistently supported these programs in the school or district?
6. How has the administrator given distinguished, varied, and individual service to the profession at the district and/or state level?

Administrator of the Year Scoring Form

affiliated with

MID-WEST ASSOCIATION FOR HEALTH, PHYSICAL EDUCATION, RECREATION AND DANCE

and the

SOCIETY OF HEALTH AND PHYSICAL EDUCATORS



Administrator’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nominator’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **Points** | **Criteria** |
|  | **Administrator Award nomination form submitted**3=YES; 0=NO |
|  | **Nominator is current OAHPERD member***3=IAHPERD member; 0=not an IAHPERD member* |
|  | **Nominator provides answers in format of recommendation**3=YES; 0=NO |
|  | **Nominee holds an administrative position** 3=YES; 0=NO |
|  | **Recommendation addresses a minimum of THREE CRITERIA of the SIX CRITERIA listed below.**  *3=YES; 0=NO**Total possible of THREE CRITERIA = 30 points* |
|  | **Criteria 1**An administrator who has been an outstanding advocate for you and your program. *10=Exemplary, 8=Excellent, 6=Good, 4=Average, 2=Satisfactory* |
|  | **Criteria 2** An administrator who has given you extraordinary support in your professional endeavors.*10=Exemplary, 8=Excellent, 6=Good, 4=Average, 2=Satisfactory* |
|  | **Criteria 3** An administrator in your school who has championed the cause of health, physical education, and/or dance at the local and/or state level.*10=Exemplary, 8=Excellent, 6=Good, 4=Average, 2=Satisfactory* |
|  | **Criteria 4** An enthusiastic school administrator who took charge and supported you and your program when there were possible serious cutbacks in staff or scheduling.*10=Exemplary, 8=Excellent, 6=Good, 4=Average, 2=Satisfactory*  |
|  | **Criteria 5** A school administrator who has educated himself/herself of the value of quality programs and has consistently promoted said programs in your school and/or district.*10=Exemplary, 8=Excellent, 6=Good, 4=Average, 2=Satisfactory* |
|  | **Criteria 6** An administrator who has given distinguished, varied, and individual service to the profession through district and/or state contributions.*10=Exemplary, 8=Excellent, 6=Good, 4=Average, 2=Satisfactory* |

**\_\_\_\_\_\_\_\_\_\_ = TOTAL POINTS (maximum 45)**