**Nebraska Association of Skilled and Technical Sciences Educators**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2018-19 Teacher Excellence Award Application**

**PERSONAL DATA:**

Name:

Address:

City:       State:       Zip:

Phone: (     )

Preferred E-Mail Address:

Award nomination is for which ONE of the following:

[ ]  Elementary [ ]  Middle/Junior High [ ]  High School

Education: (Degrees and Institutions)

Teaching Certificates held:

Number of years teaching technology education:

Number of years in present teaching position:

Present teaching assignments: (courses taught and grade level)

**PROFESSIONAL DATA:**

School District’s Name:

Superintendent’s Name:

Address:

City:       State:       Zip:

Phone: (     )

School Building Name:

Principal’s Name:

Address:

City:       State:       Zip:

Phone: (     )

**NASTSE / NITEA:**

Number of years in membership:

Offices held, committee assignments, conference presentations, conferences attended, etc. . . .

**ITEEA:**

Number of years in membership (not required for State Award):

Membership Number:

Offices held, committee assignments, conference presentations, conferences attended, etc. . . .

**OTHER:**

Association, offices held, committee assignments, conference presentations, etc. . . .

**OTHER DATA:**

Local Newspaper:

Address:

City:       State:       Zip:

Phone: (     )

***ON SEPARATE PAGES,* INCLUDE THE FOLLOWING:**

1. **What impacts do you feel your industrial and technology education program has made in your department and school?**

**2. Statement of Belief (not to exceed 50 words):**

\**This I believe about technology education in preparing students for their future…*

1. **Three or more letters of support. Letters of support should focus on:**

\* Evidence of talent in teaching – i.e. learning environment, effectiveness, assessment

\* Evidence of technology education practices

\* Professional leadership and involvement

**Applications MUST BE SUBMITTED by 11:59pm on Monday, *January 7, 2019!***

Questions??? Contact David Shabram via email at shabram.david@westside66.net or by phone at 402.408.8689.

Please mail or email your application and supporting documents to either address below.

**Mail:** *David Shabram - WMS, 8601 Arbor Street, Omaha NE 68124*

**Email:** shabram.david@westside66.net