

Outstanding Educator Award

Purpose of Award

To honor educators who have made outstanding contributions by improving access to and progress in the general curriculum (i.e. Ohio's academic content standards) for children and youth with disabilities in the Region 14/Hopewell Center Region. The nominee chosen as the award winner will be recognized at **The Exceptional Achievement Award Recognition Ceremony on April 26, 2012**. The Recognition Ceremony which is sponsored by The Regional Parent Advisory Council and The Regional Advisory Council of Region 14/Hopewell Center will be held at Hillsboro Elementary School.

Eligibility for Nominees

1. The nominee(s) must be special educators, regular educators or an educator team working collaboratively at a building or district level currently employed by a public school district (including educators who provide services to children in chartered nonpublic schools), a state operated program, or a county board of DD.
2. Special educators include: special education teachers, adapted physical education specialists, audiologists, occupational therapists, physical therapists, orientation and mobility instructors, school psychologists, speech and language pathologists, work-study and vocational special education coordinators.
3. Regular educators include: classroom teachers, counselors, school nurses, and other certified non-supervisory staff.
4. Each nominee's responsibility must include providing services to children with disabilities.

Nomination Procedures

Each nomination must include a nomination form (see attached form) signed by 3 nominators, with one signature being from the nominee's superintendent or designee.

Deadline

All nominations must be submitted by **March 1, 2012** to Sherry Campton at Region 14/Hopewell Center; 5350 W. New Market Rd., Hillsboro, Ohio 45133.

Questions?

Contact Sherry Campton at Region 14/Hopewell Center, 937-393-1904, ext. 126 or r14_scampton@mveca.org

Outstanding Educator Award Nomination Form

Information about the Nominee

Name _____ Title _____

Address _____
(Street/PO Box) (City & State) (Zip Code)

Home Phone _____

School District _____ Phone _____

Name of School _____

School Address _____
(Street/PO Box) (City & State) (Zip Code)

*Type or print exactly as to be published

Information about the Nominator

School District _____ Phone _____

School Address _____
(Street/PO Box) (City & State) (Zip Code)

Signature

Nominator _____ Phone _____

