Here is your Invitation to Nominate an Outstanding Educator as

CAS Exemplary Educator for 2017-2018
(Elementary  Middle Level  High School)

**Purpose**

1. Every school in Connecticut has a number of outstanding educators. The purpose of this award is to give public recognition in Connecticut to an Elementary, Middle Level, and High School CAS educator.
2. Nominations may be made by any present or former member of the school staff or district central office personnel.
3. The educator chosen will receive recognition in CAS publications and in the media.

**Eligibility**

CAS recognizes that outstanding educators create a classroom and school environment appropriate to the needs of the student. The following criteria will be used to determine the recipient of this award. Please note, however, that past recipients are not eligible.

1. Candidate must be a practicing educator of a CAS member school who exhibits the following:
   - Demonstrates excellence in education;
   - Demonstrates involvement with students, staff, and parents in and out of the classroom;
   - Demonstrates leadership within the profession.
2. Candidate should be in at least her/his fifth year as a practicing school educator in Connecticut and in at least the third year in her/his present position.
3. The nominator must submit the nomination addressing each of the three areas individually. The total response is limited to six pages (exclusive of Nomination Title Sheet).
4. Nominations must be accompanied by three (3) letters of recommendation, by any persons who are qualified to judge the professional performance of the candidate. Either the nomination or one of the three letters of recommendation must be from the building principal. Incomplete nominations will not be considered.
5. Finalists will be asked to write a one to two page reflective essay about her/his beliefs, motivations and/or experiences as an educator.
6. The successful candidate may also be invited to share her/his expertise through CAS sponsored workshops and/or programs, or writing for a CAS publication.
7. Nominations must be postmarked or delivered to CAS no later than March 3, 2017.
8. Nominations should be sent to: Roxanne Augelli, Assistant Executive Director, The Connecticut Association of Schools, 30 Realty Drive, Cheshire, CT 06410
9. Only one nomination will be accepted per school.

**Timeline:** Applications will be reviewed in March and April and finalists will be interviewed in May of 2017.
CAS Exemplary Educator for 2017-2018 Nomination Form

I nominate the following person to be the CAS Exemplary Educator

Level: Elementary______ Middle Level______ High School______

Name________________________________ Position____________________________________

School______________________________________________________________

Address______________________________________________________________

Town____________________ Zip_________ Telephone____________________

E-Mail______________________________________________________________

Years in Present Position_____________________ Total Years in Profession________________________

Have you confirmed the nominee’s school membership in CAS? ______ Yes ______ No

Attach three (3) TYPED letters of recommendation (limit 2 pages each) by persons other than the nominator who are qualified to judge the nominee’s professional performance. One must be from the building principal if she/he is not the nominator.

STATEMENT OF REASON FOR NOMINATION

1. Demonstrates Excellence in Education (i.e. How is the curriculum diversified to challenge all levels of ability within classroom; How is student learner assessed using multiple strategies; How are the needs of the student effectively met; How are a variety of instructional techniques utilized in the classroom).

2. Demonstrates involvement with students, staff, and parents in and out of the classroom.

3. Demonstrates leadership within the profession (i.e. Show what contributions and successes the educator has provided to the team, school, and community through past and present involvements).

Typed Name of Principal/Supervisor ___________________________ Signature of Principal/Supervisor ___________________________

Telephone ___________________________ E-Mail of Principal/Supervisor ___________________________

Typed Name of Nominator ___________________________ Signature of Nominator ___________________________

Position of Nominator ___________________________ Date Submitted ___________________________

Telephone ___________________________ E-Mail of Nominator ___________________________

Application must be postmarked by or delivered to CAS by March 3, 2017. Send completed nomination form to: Roxanne Augelli, Assistant Executive Director, Connecticut Association of Schools, 30 Realty Drive, Cheshire, CT 06410

For CAS Use Only

Date Received ___________________________

Nomination Form ___________________________

3 Letters of Recommendation ___________________________ CAS Member School _____Yes _____No

Form EE 2017-2018
CAS Exemplary Educator for 2017-2018
( Elementary   Middle Level   High School)

Nomination Title Sheet

Name of Nominee__________________________________________________________

School___________________________________________ Town______________________

This recommendation must address specifically the below listed criteria in sequence. General statements will not suffice.  Please limit response to two pages (exclusive of this title page).

CRITERIA

The Candidate:

1. Demonstrates Excellence in Education (i.e. How is the curriculum diversified to challenge all levels of ability within classroom; How is student learner assessed using multiple strategies; How are the needs of the student effectively met; How are a variety of instructional techniques utilized in the classroom).

2. Demonstrates involvement with students, staff, and parents in and out of the classroom.

3. Demonstrates leadership within the profession (i.e. Show what contributions and successes the educator has provided to the team, school, and community through past and present involvements).

__________________________________________
Typed Name of Nominator

__________________________________________
Signature of Nominator

__________________________________________
Position of Nominator

__________________________________________
Date Submitted

__________________________________________
Telephone

__________________________________________
E-Mail

__________________________________________
Address