

## THE AMERICAN LEGION Department Nebraska **Teacher of the Year**

## NOMINATION FORM

**Criteria:** Accomplishments of the teacher must be over and above their profession; consideration will be given to someone whose activities in the field of education exceeded what one would expect in that field and who **promotes American Legion youth programs**. Applicants may be accredited teacher, male or female, elementary, middle, high school teacher, veteran or non-veteran, Legionnaire or non-Legionnaire. An American Legion Post must endorse Candidates for the Teacher of the Year Award. A majority vote of the Americanism Committee will be final.

Title: Mr Mrs Ms	·	Grade:		
Name:				_
Address:				_
	(Street)			
(City)		(State)	(Zip)	_
Home Telephone #:				
Work Telephone #:				
Current Place Of Employment:		Num	iber of Years:	
Supervisor:	Su	bject(s) Taught		
Previous Education Experience(use		·		
Packet sh	ould include separ	rate documentat	tion of the following:	
Attachment 1. Involvement	t in promoting America	n Legion programs		
Attachment 2. Community	- 0		nizations and Affiliations)	
Attachment 3. First line su	pervisors endorsement l	etter		
Attachment 4. Superintendent endorsement letter				
Attachment 5. American Legion Post Commander or Adjutant letter of endorsement				
Attachment 6. Additonal supporting testimony or documents				
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Mail signed nomination to:	Activities Director			
Mail signed nomination to:	Activities Director The American Legion Department Nebraska P.O. Box 5205 Lincoln, NE 68505-0205			
Packet must arrive at Department N The Americanism Committee will p		ment Convention in June.		
Sponsored by Post Number:	of			
APPROVED:				
Post Official's Signature		Member #	Date	