Correctional Education Association

 **CEA REGION I**

 TEACHER OF THE YEAR

 NOMINATION FORM



**Eligibility**

**QUALIFICATIONS FOR SELECTION AS TEACHER OF THE YEAR**

1. The individual selected must spend at least 51% of his or her work time in classroom instruction

2. The individual selected must have taught in correctional facilities for a minimum of two years.

3. The individual selected must have been a CEA member for at least one year prior to nomination.

4. The individual selected must have demonstrated leadership qualities and be active in promoting
 improvements in correctional education.

5. The individual selected must have demonstrated devotion to the teaching profession as evidenced by a
 willingness to work beyond his or her job description.

**Instructions**

1. A nomination letter must accompany the application.

2. Nominations should be by your immediate supervisor, principal, or superintendent. Also, any current CEA
 member in good standing for at least 3 years can nominate a teacher. One recommendation MUST be by
 your immediate supervisor who can provide verification that the teacher selected will be granted time to
 attend both the Region I Conference and the International Conference.

3. No less than two (2), but no more than four (4), recommendations must be included with the
 application.

4. Verifying documentation in the form of reviews, news articles, etc. may be attached to the application, but the
 entire packet must be reproducible.

5. You may write your responses to the questions on a separate sheet of paper.

**Please return Application by March 23, 2019**

Dear Correctional Educator,

Enclosed is your application for the CEA Region I Teacher of the Year Award. Please complete the packet and return it to the address below by March 23, 2019.

The Region I Teacher of the Year is featured at the 2019 CEA Region I Conference to be held at the Niagara Falls Conference Center in Niagara Falls, NY from May 15-17, 2019 as well as the 2019 International CEA Conference to be held in Detroit, MI from July 28 – August 1, 2019. Attendance at both events is expected. Hotel registration, for the conference dates, and conference registration, will be provided at both events. A travel stipend, for the International Conference, will be reimbursed upon verification of receipts and attendance.

***Any Questions call:***

Terri Fazio

Tel. (717) 728-2005

Or email: tfazio@pa.gov

***Please return completed packets to:***

CEA Region 1 Teacher of the Year
c/o Bureau of Correction Education
1920 Technology Parkway

Mechanicsburg, PA 17050

**CORRECTIONAL EDUCATION ASSOCIATION Teacher of the Year Nomination Form REGION I**

I nominate for Teacher of the Year for 2019.

(Print Name of Person Nominating) (Signed)

Position/Title:

Address:

(City) (State/Province) (Zip/Postal Code)

Telephone: Date:

Name of Nominee:

Agency:

Supervisor: Telephone:

Institution:

Telephone:

Address:

(City) (State/Province) (Zip/Postal Code)

Number of Years as an Educator: Number of Years as a Correctional Educator:

**PREVIOUS CORRECTIONAL EXPERIENCE**

Dates Institution and Location Position

**RELATED EXPERIENCE**

Dates Institution and Location Position

**PLEASE REVIEW INSTRUCTIONS BEFORE COMPLETING THIS SECTION**

I. **Extraordinary Contributions to Correctional Education** (This section should include activities that improve the education program or enhance the well-being of the students. They can be part of the regular school program or extracurricular, and they can occur during the regular school day or beyond normal working hours.)

A. Description of the Extraordinary Contribution(s):

B. Universality of Application (Can it be applied to many correctional schools or is its application limited to one school? Explain):

C. Importance of the Contribution (Describe the pragmatic needs fulfilled.):

**II. Professional Growth**

A. Professional Courses beyond Certification Requirements:

**III. Background Information**

A. Professional Duties:

B. Academic and/or Vocational Background and Experience:

C. Community Activities:

D. Hobbies and Interests:

**IV. Statement of Personal Philosophy** (Completed by the nominee):

I, membership # accept the nomination and agree to complete the necessary forms and to participate fully in the Teacher of the Year process.

Signed: Telephone: Address:

(City) (State/Province) (Zip/Postal Code)