

2017 Nomination Form

Marcus Foster Memorial Award for Administrator Excellence

IMPORTANT!

This form must be used to submit nominations. Please use the required form pages for the criteria explanation. In addition, you may attach a total of two (2) pages maximum of additional supporting documents, such as newspaper articles or letters of support (do not attach résumés).

CRITERIA

Awarded to an **ACSA member** exemplifying the following criteria. **Use the attached form pages to answer each, providing specific examples.**

- An administrator who is a skilled manager of change.
- An administrator whose management style involves many sectors of the community in addition to broad professional involvement.
- An administrator who is willing to take risks to improve educational opportunities.
- An administrator who is creative, who is willing to try new ideas and who reaches out to children.
- An administrator who speaks out in his/her community on issues that have an impact on children.
- An administrator who respects all people, especially children, as human beings, and who protects the rights of all persons to have full citizenship.

PERSONAL INFORMATION

Name of Nominee		Region # (1-19)
Current Position/Title		School or District
Address		City, State Zip
Daytime Phone	Cell Phone	E-mail

NOMINEE'S EDUCATION

Schools Attended	Degrees	Dates

NOMINEE'S ADMINISTRATIVE EXPERIENCE

Positions Held	School Systems/Firms	Dates

NOMINATION SUBMITTED BY

Name	
Title	School or District
Address	City, State Zip
E-mail	

DEADLINE FOR NOMINATIONS IS FEBRUARY 6, 2017

PROFESSIONAL GROWTH

Please select no more than five major activities in each category, confining your responses to this page.

A. MEMBERSHIPS AND OFFICES HELD IN PROFESSIONAL ORGANIZATIONS/DATES:

1. _____
2. _____
3. _____
4. _____
5. _____

B. ACSA MEMBER SINCE _____ (YEAR) Nominee must be a current ACSA member to be eligible for this award.

C. PROFESSIONAL DEVELOPMENT ACTIVITIES/DATES:

1. _____
2. _____
3. _____
4. _____
5. _____

D. PUBLICATIONS/ARTICLES/PRESENTATIONS/DATES:

1. _____
2. _____
3. _____
4. _____
5. _____

E. COMMUNITY LEADERSHIP/DATES:

1. _____
2. _____
3. _____
4. _____
5. _____

Before you submit your nomination, be sure to include:

- ☐ Your completed 4-page nomination form (typed versus handwritten), including 2 form pages explaining how the nominee meets the award criteria.
- ☐ (Optional) 2 pages maximum of supporting documents, such as letters of support or newspaper articles.

Send completed form to:

Emily Senecal, Awards Coordinator
 1029 J Street, Suite 500
 Sacramento, CA 95814
 phone: 916.329.3833
 fax: 916.596.9556
 e-mail: esenecal@acsa.org

CRITERIA EXPLANATION

Please write your responses in the space provided using no smaller than 11pt font.

Awarded to **an ACSA member** exemplifying the following criteria. **Use the following two pages to explain how your nominee meets these criteria, providing specific examples.**

AN ADMINISTRATOR WHO IS A SKILLED MANAGER OF CHANGE.

AN ADMINISTRATOR WHOSE MANAGEMENT STYLE INVOLVES MANY SECTORS OF THE COMMUNITY IN ADDITION TO BROAD PROFESSIONAL INVOLVEMENT.

AN ADMINISTRATOR WHO IS WILLING TO TAKE RISKS TO IMPROVE EDUCATIONAL OPPORTUNITIES.

AN ADMINISTRATOR WHO IS CREATIVE, WHO IS WILLING TO TRY NEW IDEAS AND WHO REACHES OUT TO CHILDREN.

AN ADMINISTRATOR WHO SPEAKS OUT IN HIS/HER COMMUNITY ON ISSUES THAT HAVE AN IMPACT ON CHILDREN.

AN ADMINISTRATOR WHO RESPECTS ALL PEOPLE, ESPECIALLY CHILDREN, AS HUMAN BEINGS, AND WHO PROTECTS THE RIGHTS OF ALL PERSONS TO HAVE FULL CITIZENSHIP.