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NAEA Awards Program Nomination Form

This form may be filled out electronically when downloaded as a PDF at www.arteducators.org
A separate form must be submitted for each nomination. • Please type or print neatly.

I, _____, nominate _____
Name of Nominator Name of Nominee

for the following award: _____
Please print the exact award title as it appears in the NAEA Awards Program Booklet.

Nominee Information

Full Name of Nominee _____
(Dr., Mr., Ms., Mrs.) First M.I. Last

Membership Division _____ NAEA ID # _____ Region _____
Eastern, Pacific, Southeastern, Western

Nominee's Home Address _____
Street/P.O. Box City State Zip

Current Employer _____ Position/Title _____

If retired, indicate date of retirement ____/____/____
MM DD YY

Work Address _____
School/Building Street/P.O. Box City State Zip

Home Phone () _____ Work Phone () _____ E-mail _____

I certify that I am not an NAEA Board Member, NAEA Board Member-Elect, NAEA Regional Division Director, elected or appointed state officer, or a member of any award review committee.

Nominator Information

Full Name of Nominator _____
(Dr., Mr., Ms., Mrs.) First M.I. Last

Nominator's Home Address _____
Street/P.O. Box City State Zip

Work Address _____
School/Building Street/P.O. Box City State Zip

Home Phone () _____ Work Phone () _____ E-mail _____

I certify that I am not an immediate family member (spouse, child, parent, sibling) of the person who I am nominating.

AWARD PACKETS SUBMITTED AFTER DEADLINE* OR CONTAINING INSUFFICIENT or EXTRA MATERIALS WILL BE CONSIDERED INVALID.

*Unless otherwise stated in the award description, nomination packets as well as State/Province Art Educator Award notification forms must be submitted to the NAEA National Office digitally on or before **October 1**.