

## **ASPIRING EDUCATOR AWARD(S)**

### Guidelines for Selection:

1. The award shall go to one education major who is currently enrolled in a teacher training program.
2. Each recipient shall be a dues paying member of the NEA/IEA Aspiring Educator program. (23)
3. Nominations may come from locals, regions, aspiring educator chapters, and advisors in Idaho colleges/universities. (23)
4. No more than one nominee will be accepted from any one college/university.
5. The Awards Subcommittee of the Board of Directors will screen nominations submitted to the Board. The awards subcommittee shall make a recommendation to the Board of Directors at its winter meeting. The Board of Directors shall act upon the recommendation at that meeting.
6. The award shall be given annually at the IEA Delegate Assembly.
7. The award shall be given only if an acceptable nominee(s) is/are selected.
8. Information about the Aspiring Educator Award shall be published on the IEA website. Notification will be sent to local associations including college/university advisors and aspiring educator chapters prior to the end of December to allow time for submission of nominations. (23, 25)
9. The award shall consist of an appropriate individual plaque, the name engraved on a perpetual plaque displayed in the headquarters office and payment of the NEA/IEA Aspiring Educator membership dues for the award recipient for the previous year. (23)
10. Non-IEA Delegate Assembly delegates shall receive reimbursement per current IEA Policy to attend the IEA Awards Ceremony at Delegate Assembly. (07,16,17, 18)

**ASPIRING EDUCATOR AWARD(S)  
IEA AWARDS NOMINATION FORM**

**Use a separate form for each nomination.**

I hereby submit a nomination for the ASPIRING EDUCATOR AWARD(S):

Nominee: \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

College/University: \_\_\_\_\_

In the space below, please indicate the reasons for nomination and the qualifications for the nominee in 2000 characters. Please attach supporting documents and letters.

Nominated by: \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Title/Affiliation: \_\_\_\_\_