

KNEA Friend of Education Award Nomination Form

(Print this form)

I hereby submit the name of the following person or organization in nomination for the Friend of Education Award to be presented at the Annual Meeting of the Kansas Representative Assembly.

Nominee _____ Telephone Number _____

Position and/or Organizational Affiliation _____

Address _____

City _____ State _____ Zip Code _____

In no more than 100 words indicate the reasons for your nomination and summarize the nominee's qualifications for the award. Documents and other materials supporting your nomination may be submitted with this nomination form.

Nominations submitted for the Friend of Education Award will be evaluated on the basis of award criteria: leadership, acts, and support of education that establish the nominee as a true friend of education, education employees, or students.

Nominating member or affiliate _____

Signature of nominator or affiliate officer _____

Name of local affiliate _____

Address _____

City _____ State _____ Zip Code _____

Telephone Number _____

Mail this form with attachments to: KNEA President, KNEA, 715 SW 10th Avenue, Topeka, KS 66612-1686.
The deadline for receipt for the nomination form is February 1.