Delaware State Education Association
Standing Strong for Student Success

Community Partner Award

Purpose of Award:

The Community Partner Award may be presented annually as established by the DSEA Executive Board. The purpose of this award is to recognize local businesses, organizations, or individuals that support public education and the work of DSEA and to build relationships with members of our community.

Criteria:

The DSEA Executive Board will review the applications and select recipient(s) at the February Board meeting based on the following criteria:

- Recipient(s) must demonstrate support of public education.
- Recipient(s) must enhance the educational opportunities of students.
- Recipient(s) must work cooperatively with public school staff.
- Recipient(s) must consistently demonstrate support of the mission of the Delaware State Education Association.

Recognition:

- The recipient will receive a certificate.
- The recipient will receive recognition in *ACTION* and on the DSEA website.

Award Requirements:

- Businesses or organizations may be nominated by a member of DSEA or a local association.
- The DSEA Award Nomination Form must be completed and submitted to the DSEA Dover Office by **February 1**.
- If applicable, include supporting documents such as pictures, letters of recommendation, newspaper articles, etc. Documents presented for consideration must show evidence of meeting the criteria.

Delaware State Education Association
Standing Strong for Student Success

Delaware State Education Association
Individual Award Nomination Form

Anyone wishing to nominate an individual for a DSEA Award must complete this form. All application packages must be received in the DSEA Dover Office, 136 East Water Street, Dover, DE 19901 no later than 5:00 p.m. on February 1. Should February 1 fall on a weekend, the nomination package would be due by 5:00 p.m. on the preceding Friday. All Awards will be presented upon the approval of the DSEA Executive Board. (Revised 3/10)

Title of Award _____

Name of Nominee _____

Nominee's School District _____

Nominee's Worksite/Address _____

_____

Nominee's Home Address: _____

Nominee's Home Phone Number: _____ **E-mail:** _____

Names of Members or Association Nominating: _____

Referring to specific incidences and attaching any supporting documentation as appropriate, please indicate how the nominee meets the criteria and award requirements.

_____
_____
_____
_____
_____

Signature of Nominator: _____

Date Nomination Submitted (must follow Award Guidelines) _____