



Monadnock Region Early Childhood Educator of the Year Nomination Form

Nominee Information:

Educator's Name _____

Name of School/Center/Home Program _____

Address _____ Town _____ Zip _____

Telephone _____ Email Address _____

School/Center Type: please circle Home School Center Other

State of New Hampshire License Number for School/Center/Home (public school centers will not have a license number) _____

Your Information:

Name _____

Address _____

Telephone _____ Email Address _____

Relationship to Nominee: please check: ___ Parent/Guardian of Child
 ___ Other Family Member
 ___ Administrator
 ___ Colleague

Educator's Name _____

Please Provide Details When Answering the Following 4 Questions

Please limit responses to no more than 2 pages.

1. How does the nominee display a passion for educating young learners?

2. How does the nominee exhibit professional relationships with the children and families who are served in the school/center/home program?

Educator's Name _____

3. How does the nominee demonstrate creative approaches to support children's growth, learning and development?

4. How does the nominee demonstrate collaboration with others (e.g. families, staff members and the community) to create and sustain a safe and nurturing environment?

To the best of my knowledge, the statements in this application reflect the individual being nominated. I give permission for this information to be used to describe the winning candidate and in publicity for the event.

Signed _____ Date _____