

NATIONAL OUTSTANDING ASSISTANT PRINCIPAL OF THE YEAR AWARD PROGRAM

A Program to Honor Assistant Principals in
Elementary and Middle Level School Leadership

Application

September 1, 2016- June 30, 2017



The National Association of Elementary School Principals Foundation

~ PROGRAM BACKGROUND ~

The National Association of Elementary School Principals is committed to preparing assistant principals to step into the principal role. Recognition for the exceptional leadership of the men and women who are responsible for the day-to-day operations of PreK-8 schools instills pride in their accomplishments and reinforces their leadership in helping children develop a lifelong love of learning.

~ CRITERIA ~

- Applicant must be a member of the National Association of Elementary School Principals at the time of nomination.
- Applicant must be an active assistant principal at the time of nomination.
- Applicant must be an active assistant principal for at least two years.
- Applicant's school must be committed to excellence through programs designed to meet the academic and social needs of all students.
- Applicant's school must have firmly established community ties with parents and local business organizations.
- Applicant must be respected by students, colleagues, parents, and the community at-large.
- Applicant shows strong educational leadership by setting high expectations for school staff and students.
- Applicant must exhibit exceptional leadership in a particular school program and/or is heavily involved in finding a solution to a problem faced by the school.

~ PROCESS ~

Public school elementary and middle-level assistant principals apply for the award via their state association. It is anticipated that each state will honor its State Assistant Principal of the Year at the annual state conference or some other state event. NAESP will prepare a Certificate to be presented to each state's nominee.

The 2016-2017 program will begin September 1, 2016, and be completed by June 30, 2017. To be eligible for this program, applicants must complete the NAESP application and return it to their state affiliate in a timeline established by the state affiliate. Awardees could be announced whenever the process is completed and NAESP will send the certificate at that time. **All selected awardees must submit a labeled professional, digital, photograph (a "headshot" with a plain, color background) at 300 dpi to state affiliates once he/she is named.** A roster of 2016-2017 award winners will be featured on the NAESP Web site.

NATIONAL OUTSTANDING ASSISTANT PRINCIPAL OF THE YEAR AWARD PROGRAM

Application Form

Please type, word process, or print clearly)

Name	Prefix	First	Middle Initial	Last	Suffix
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~ Contact Information - Home ~

Home Address	Street	City	State	Zip	Country
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Home Phone	(Include Area Code)
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Home E-Mail

~ Contact Information - School ~

School Name

School Address	Street	City	State	Zip	Country
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School Phone	(Include Area Code)
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School E-Mail

~ Professional Information ~

Professional Experience (List by most recent, excluding current position/school)

Position	Name and Location of School	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Number of Years as an Assistant Principal _____ **Total Number of Years in Current Position/School** _____

Professional Preparation (List by most recent)

Degree	Name and Location of Institution	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Name _____

~ School Information ~

School's Grade Configuration (check one)

- Elementary School Applicant- School's Grade Configuration _____
(Must include either pre-K, K, 1, 2, 3, or 4 though older students may attend as well)
- Middle School Applicant – School's Grade Configuration _____
(May NOT include pre-K, K, 1, 2)

School Enrollment _____

Students Receiving Free/Reduced-Price Meals _____ %

Ethnic/Racial Composition

- _____ % American Indian/Alaskan Native
- _____ % Asian
- _____ % African American/Black
- _____ % Hispanic/Latino
- _____ % Native Hawaiian/Pacific Islander
- _____ % Caucasian/White

~ State and District Information ~

State or Area Represented

School District

School Superintendent's Name

District Phone (including area code)

School Superintendent's Address

School Superintendent's E-Mail

School Setting: (check one) Urban Suburban Small Town Rural

~ PROFESSIONAL ACTIVITIES, AWARDS, and HONORS ~

Name of Professional Association/Organization	Offices Held / Awards Received	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

~ SERVICE TO THE COMMUNITY ~

Name of Community Association/Organization	Offices Held / Awards Received	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

~ TWO MOST SIGNIFICANT ACCOMPLISHMENTS AS AN ASSISTANT PRINCIPAL ~

- 1) _____

- 2) _____

~ Best Practices ~

TWO EXAMPLES OF BEST PRACTICES *(Responses do not have to be limited to the space provided but should be no more than 500 words each.)*

1) _____

2) _____

Name _____

To Be Completed by Applicant

~ SCHOOL LEADERSHIP STATEMENTS ~

Please answer the following questions that qualify you to represent your state or organization as its National Outstanding Assistant Principal.

Please use at least 10 pt. type and limit each response to a maximum of 300 words. Answer each question on a separate 8 ½ x 11" sheet of plain paper. Please include your name in the upper right hand corner of each page.

**1. What specific impact have you made on student success as an assistant principal?
How do you monitor, track and sustain progress at your school?**

2. What legacy will you leave at your current school?

APPLICANT'S REFERENCE FORM

~ Letters of Reference ~

Name of Applicant: _____

Each applicant is asked to secure two letters of reference, one from the applicant's supervisor and one selected from the following persons: **superintendent, a fellow administrator, a teacher currently serving on the applicant's staff, or a parent/civic/community leader.** Each letter of reference should include a copy of this form.

To the Applicant's Reference:

The National Outstanding Assistant Principal (NOAP) selection committee appreciates your help in assessing this applicant's skills and knowledge in the area of school leadership. Please base your comments on the applicant's professional performance. Limit your comments to one 8 ½ x 11" page, using at least 10 pt. type. Please seal your completed reference letter in an envelope, place your signature over the seal, and return it to the applicant. If you prefer, your letter of reference may be mailed directly to the applicant's state affiliate or the organization that he/she represents.

This letter of reference is from (please check one):

the applicant's supervisor

a fellow administrator

a teacher

a parent/civic/community member

Please print or type.

Printed Name of Reference

Title

Address

City

State

Zip

Country if not USA

Phone (including area code)

E-Mail Address

Signature of Reference

Date

The National Outstanding Assistant Principals program does not discriminate on the basis of race, color, creed, ethnicity, age, religion, county of origin, or sexual orientation.

TO BE COMPLETED BY APPLICANT

**NATIONAL OUTSTANDING ASSISTANT PRINCIPAL OF THE YEAR
AWARD PROGRAM**

APPLICANT'S AFFIRMATION STATEMENT

I do hereby affirm that I plan on remaining in a position of school leadership during the 2016-2017 school year and I am a member of NAESP.

I do further affirm that the information included in this application packet is a fair and true representation of the facts of my professional career.

I do hereby grant my permission for any or all of the enclosed materials (but excluding my home address, home and/or cell phone number, and home e-mail address) to be shared with persons and organizations interested in promoting the National Outstanding Assistant Principal of the Year Award Program and its honorees.

PRINTED NAME OF APPLICANT: _____

APPLICANT'S SIGNATURE: _____

DATE: _____

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