**PARTNERSHIP IN EDUCATION AWARD**

**Nomination Form**

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| Name of Educator: |  | |
| Title or Position of the Nominee: |  | |
| Name of School and School District: |  | |
| Contact Information:  Address and Phone Number | Individual: | School: |

Award Package must include:

1. Completed Nomination Form
2. Recommendation/Endorsement Letter from Supervisor or Principal
3. Résumé or Curriculum Vitae or Biography
4. Other supporting documentation (optional)

Return documents to [aerophyzsociety@gmail.com](mailto:aerophyzsociety@gmail.com).

**Describe the accomplishments of the educator, separated by: (use no more than 2000 words total)**

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| **Criterion 1: Significant accomplishment(s) warranting Aerospace Physiology Society recognition.** |
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| **Criterion 2: Evidence of impact on students, the school and school district.** |
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| **Criterion 3: Demonstrated professional and technical performance in the teaching of life science.** |
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| **Criterion 4: Innovative and creative teaching practices.** |
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