OFFICE OF SUPERINTENDENT OF PUBLIC INSTRUCTION
Learning and Teaching
Old Capitol Building
PO BOX 47200
Olympia, WA 98504-7200
(360) 725-6117 TTY (360) 664-3631

2007 Washington State Teacher of the Year

BACKGROUND INFORMATION

NAME	HOME TELEPHONE NUMBER ( )
HOME ADDRESS	WORK TELEPHONE NUMBER ( )

SCHOOL AND PROFESSIONAL PROFILE

SCHOOL DISTRICT	NAME OF SCHOOL
DISTRICT ADDRESS	SCHOOL ADDRESS
SUPERINTENDENT	PRINCIPAL

Grade(s) taught: _____ Years in present position: _____ Total years of teaching experience: _____

Plan to continue in full-time teaching status? _____

Major subject(s), if any: _____

Colleges and universities attended, degrees and dates:

_____ _____

_____ _____

I hereby give my permission that any or all of the attached material may be shared with people interested in promoting the Washington and National Teacher of the Year Programs.

_____
SIGNATURE OF APPLICANT DATE

I acknowledge that the nominee submits this application with my approval and that if the nominee is selected as the 2007 National Teacher of the Year he or she will be released from classroom responsibilities during the year of recognition.

_____ _____
SIGNATURE OF DISTRICT SUPERINTENDENT DATE SIGNATURE OF PRINCIPAL DATE

School Districts:
Please forward school district nominee application materials, including this form, to local ESD for regional candidate selection.

Educational Service Districts:
Please forward regional candidate's application materials, including this form, to:
Julie Hanson, Teacher Awards Program
Office of Superintendent of Public Instruction
PO Box 47200
Olympia WA 98504-7200