

SCCTE Secondary Section High School Teacher of Excellence

Purpose: The Secondary Section of SCCTE wishes to recognize and celebrate high school classroom teachers. SCCTE's selection will be entered into the NCTE's Secondary Section Teacher of Excellence award program.

Who Can Participate: All high school English teachers who are members of SCCTE and NCTE.

Number of Awards: Annually, one individual from the state will be selected and entered into the NCTE's Secondary Section Teacher of Excellence award program.

Award Specifics: Each recipient will be recognized at the SCCTE annual convention in January and will receive a certificate and plaque. A booklet will be provided at the convention highlighting comments from the letters of recommendations along with a certificate from SCCTE.

Award Criteria: Each entrant will be nominated by an individual or group of individuals and complete the Nomination Form.

Honoree Supporting Data: The nominating individual or group is responsible for submitting the honoree's resume and letters of support from at least **TWO** different constituencies – principal, supervisor, chairperson, peer, parent or student – about contributions in the classroom and excellent practices exhibited by the recipient. These items, including the Award Information Form, will be forwarded to the award administrator for this honor.

Deadline: Documentation should be sent to the award administrator by **March 1** of each year. Materials should be sent to the address on the current nomination form.

Acknowledgement: Awardees will receive a form to submit to their local newspaper acknowledging that they have received this award.

DEADLINES: DOCUMENTATION SHOULD BE SENT BY MARCH 1 TO:
SCCTE Secondary Section High School Teacher of Excellence Committee
Chair, Sara Biltz, 23 Glenhawk Loop, Irmo, SC 29063 or by email to
SBiltz@sc.rr.com

SCCTE Secondary Section High School Teacher of Excellence Award

Nomination Form

Please Print this form

Name of Nominee: _____

Address: _____

City/State/Zip: _____

Phone: (H) _____

Phone: (O) _____

Email: _____

Fax: _____

Name & Address of Nominee's School: _____

Principal's Name: _____

School Phone: _____

School Fax: _____

Contact Person Responsible for Nomination: _____

Address of Contact Person: _____

City/State/Zip: _____

Phone: (H) _____ Phone: (O) _____

Email: _____

**This completed form along with nominee supporting data listed on previous pages must be sent to:
SCCTE Secondary Section High School Teacher of Excellence Award, Sara Biltz, 23
Glenhawk Loop, Irmo, SC 29063, No later than March 1.**

