**Innovator Award Application**

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| **Name of Nominee:** |  |

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| --- | --- |
| **Mailing Address:** |  |

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| --- | --- | --- | --- |
| **Phone:** |  | **District:** |  |

**MATERIAL SHOULD BE ORGANIZED IN THE FOLLOWING ORDER AND SUBMITTED AS A PDF OR PRINTED PACKET:**

* Overview Form
* Basic Data Sheet
* Resume
* Narrative document outlining nominee’s strengths in the following areas:

**Please answer each of the questions below:**

1. Describe the successful innovative programs established as part of the school program by the nominee.
2. Describe the effect of the nominee’s innovative programs on students, staff, and the community.
3. Describe how the nominee demonstrates the ability to be a change agent.

* Up to three letters of recommendation may be included as part of the application.

**Nomination submitted by:**

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| --- | --- | --- | --- |
| Name: |  | School District: |  |

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| Note: If the nomination is being submitted by a regional group, please provide the name and email address of a contact person: |
|  |

**PLEASE SEND OR EMAIL YOUR PACKET TO:**Jennifer Lowery, Superintendent

jennifer.lowery@k12.sd.us   
Tea Area School District

131 N Poplar Ave

Tea, SD 57064

**ALL PACKETS MUST ARRIVE ON OR BEFORE MARCH 28.**

**Superintendent Awards - Overview Form**

* Completed nomination form must be received by the secretary of SDSSA prior to March 28th of the year of the selection.
* Outstanding Superintendent of the Year nominations will be considered for Community Leader of the Year and Innovator of the Year

**Choose an award Category(s):**

|  |  |
| --- | --- |
|  | **Distinguished Service Award:** |
| * Is to honor retired or retiring superintendents who have exhibited exemplary leadership ability and who have enhanced the school Superintendency in South Dakota. The award shall be in the form of a suitably engraved plaque which shall remain the property of the person so chosen to receive the award. | |

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|  | **Innovator Award:** |
| * Is to honor a superintendent who has exhibited exemplary leadership ability in creating new programs or concepts that have a positive impact on staff development, recruitment, or retention; or creating new programming that directly impacts student learning, student achievement, or student educational experiences. | |

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|  | **Rookie of the Year Award:** |
| * Is to honor a superintendent in their first three years in the profession who has exhibited exemplary leadership ability in making a difference in their school district through new programs or concepts that have a positive impact on the dynamics of the district. | |

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|  | **Community Leader of the Year Award:** |
| * Is to honor a superintendent who has made an investment in his/her community above and beyond the scope of the school district’s responsibilities. | |

**Nominated By:**

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| School Site & District: |  |
| Name: |  |
| Title: |  |
| Phone: |  |
| Email: |  |

**Nominee Information:**

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| --- | --- |
| Name of Nominee: |  |
| District: |  |
| Phone Number: |  |
| Email: |  |

**SUPERINTENDENT AWARD**

*Basic Data Sheet*

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| --- | --- | --- | --- |
| **Full Name:** |  | **Phone Number:** |  |
|  |  |  |  |
| **Home Address:** |  | | |

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| **Name of School District:** |  | **School Address:** |  |

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| **Years in Current Position:** |  | **Total Years in Education:** |  |

***All nominations for Superintendent of the Year will also be considered for Superintendent of the Year, Innovator of the Year, and Community Leader of the Year.***

***PROFESSIONAL PREPARATION***

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| --- | --- |
| ***Date(s)*** | ***Institution- Location*** |
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***PREVIOUS TEACHING/ADMINISTRATIVE EXPERIENCE***

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| --- | --- | --- |
| ***Date(s)*** | ***Position*** | ***Institution- Location*** |
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***Please Include:***

* *Resume*
* *Narrative document*
* *Up to three letters of recommendation*