



**PURPOSE:** NELMS seeks to honor **teachers** who are devoted to young adolescents, committed to best middle practices, and who have taught for 20 or more years.

**CRITERIA:**

- Passionate about middle level education
- Currently teaching middle level students
- Serves as an educational leader
- Advocates for the middle level community
- Provides formal/informal mentoring to colleagues
- Models effective middle level instructional practices, such as:
  - Incorporating activity-based learning
  - Developing a sense of student ownership in their learning
  - Integrating higher order thinking
  - Fostering curriculum connections
  - Using a variety of assessment tools
  - Building relationships with students and families

**APPLICATION PROCESS:**

The Applicant must collect the following, and send all materials in one packet to:  
NELMS, 50 Water Street–Suite 10, North Andover, MA 01845.

The packet must be received by 3:30pm on **January 6, 2017**.

- The **nominator** must address in writing how the **nominee** meets the six (6) criteria stated above, in 1,500 words or less, (250 words per criteria).
- The **nominator** must collect one letter of support, of not more than five hundred (500) words, from each of the following:
  - A parent or community member associated with the **nominee's** current career
  - A former or current student from the **nominee**
  - A professional colleague of the **nominee**
- The nominee must write about an experience that exemplifies their contribution to middle level education. This submission must be in 500 words or less, that is typed and double-spaced.

**RECOGNITION:**

Those that receive an award will be recognized at the NELMS Annual Conference, receive a two-day registration to our Annual Conference, will be recognized in Mid Lines, the NELMS newspaper, and be listed on the web site. The recipient will also be invited to present the award to the 2018 award winner at the 2018 Annual Conference Welcome & Recognition Reception.

Person Nominated \_\_\_\_\_

School Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone # (home) \_\_\_\_\_ (school) \_\_\_\_\_

Name of Nominator \_\_\_\_\_

E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

Principal's Signature: \_\_\_\_\_