

Barnes Award

Nomination Form

(Nominations must be received at the NLTA Office by January 15)

The Barnes Award has been established to recognize outstanding professional development services provided at the Special Interest Council level. A maximum of one award may be presented each year.

NOMINATIONS PROCEDURE

Nominations must come from special interest councils or branches and must be provided on this form. Regional SIC executives may submit nominations to their provincial SIC executives. Attach additional sheets if space is insufficient.

Nominations for the award will be carried forward for a period of two years for consideration pending approval of the nominating group and updating of nominee applications and providing the nominee is an active member of the Association in the year of consideration/awarding.

SELECTION COMMITTEE

The Selection Committee will be the Professional Issues Committee.

FUNCTIONS OF THE SELECTION COMMITTEE

1. Examination of all applications received. Recommendations to be based on majority vote of the committee.
2. Recommendation to the Provincial Executive Council for selection.

The Barnes Award

Nominee: _____

Nominated by: _____

(Special Interest Council or Branch)

Special Interest Council Service or Recognized Professional Development Involvement

List, on a yearly basis, professional development service that has been performed by this nominee. This should include Executive positions held in special interest councils, professional development work undertaken over the years within branches, involvement in curriculum development projects, special professional development instructional seminars, inservices, etc. *(If sufficient space is not provided on this form, list information on a separate sheet(s) and attach.)*

Other outstanding services to special interest councils (e.g. founder of councils, regionals, etc.):

Record of Teaching Service:

Describe any special projects initiated or led by the nominee.

Describe any contributions in the area of curriculum development.

List other activities of note:

GENERAL INFORMATION

Home Address:

Work Address:

Home Telephone: _____

Work Telephone: _____

Nominee's Ring Size: _____

E-MAIL ADDRESS: _____

DECLARATION BY NOMINEE

I, _____, hereby declare that I have examined the
(print name of nominee)

information contained herein and do certify that it is true and accurate to the best of my knowledge.

(Signature of nominee)

(Date)

SIGNATURE OF PROVINCIAL SPECIAL INTEREST COUNCIL OR BRANCH EXECUTIVE MEMBERS

(Provincial SIC or Branch President)

(Provincial SIC or Branch Executive Member)

RETURN TO:

**Professional Development Division
Newfoundland and Labrador Teachers' Association
3 Kenmount Road
St. John's, NL A1B 1W1**

FOR OFFICE USE:

Date received at office _____

Dated processed by committee _____