

## TEACHER TRAINEE AWARD(S)

### Guidelines for Selection:

1. The award shall go to one education major who is currently enrolled in a teacher training program.
2. Each recipient shall be a dues paying member of the NEA/IEA Student program.
3. Nominations may come from locals, regions, student chapters, and advisors in Idaho colleges/universities.
4. No more than one nominee will be accepted from any one college/university.
5. The Awards Subcommittee of the Board of Directors will screen nominations submitted to the Board. The awards subcommittee shall make a recommendation to the Board of Directors at its winter meeting. The Board of Directors shall act upon the recommendation at that meeting.
6. The award shall be given annually at the IEA Delegate Assembly.
7. The award shall be given only if an acceptable nominee is selected.
8. Information about the Teacher Trainee Award shall be published at least once each year. A letter of announcement will be sent to the region offices and local associations including college/university advisors and student chapters prior to the end of December to allow time for submission of nominations.
9. The award shall consist of an appropriate individual plaque, the name engraved on a perpetual plaque displayed in the headquarters office and payment of the NEA/IEA Student membership dues for one award recipient for the previous year.
10. Travel shall be allotted to the award recipient per current IEA per diem to attend the IEA Award Ceremony at Delegate Assembly. (07,17)

**TEACHER TRAINEE AWARD(S)  
IEA AWARDS NOMINATION FORM**

**Use a separate form for each nomination.**

I hereby submit a nomination for the TEACHER TRAINEE AWARD(S):

\_\_\_ Elementary Education Major

\_\_\_ Secondary Education Major

Nominee: \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

College/University: \_\_\_\_\_

In the space below, please indicate the reasons for nomination and the qualifications for the nominee in 250-300 words. Please attach supporting documents and letters.

Nominated by: \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Title/Affiliation: \_\_\_\_\_

RETURN TO:  
**IDAHO EDUCATION ASSOCIATION**  
620 North 6<sup>th</sup> Street  
PO Box 2638  
Boise ID 83701