

**MSACTE OUTSTANDING ALUMNUS AWARD**  
**NOMINATION FORM**  
**DEADLINE: JANUARY 31ST**

This award is presented at the Summer Business Meeting of MS-ACTE each year.

**GUIDELINES AND PROCEDURES**

1. Nominator must be a current MS-ACTE member.
2. Must submit a completed nomination form.
3. The nominee must submit evidence of completion of reimbursable career and technical program (photocopy of a diploma, certificate, etc.) which has provided training for the nominee for a minimum of one year.
4. The nominee must have made a worthy contribution to career/technical education after completion of the training. Submit no more than one double-spaced typed page with supporting details.
5. The nominee must be currently working in a field related to career and technical training.
6. Submit a brief statement indicating job title and description of job duties. Submit no more than one (1) page.
7. The nominee must be endorsed by two (2) career and technical educators. Submit two (2) letters of endorsement/recommendation by career and technical educators who can attest to the nominee's contributions.
8. All required information must be submitted in the order listed, typed and in PDF format. Do not exceed six (6) pages. Send all completed material and information to:  

MS ACTE Awards Program Chair, Patricia Ellison  
[pellison@pcsd.ms](mailto:pellison@pcsd.ms), 662-489-1826
9. Required information should be received by the awards committee no later than January 31st.

## MSACTE Alumnus AWARD NOMINATION FORM

NAME OF NOMINEE\_\_\_\_\_

BUSINESS AND/OR PROFESSION\_\_\_\_\_

ADDRESS\_\_\_\_\_

CTE PROGRAM ATTENDED\_\_\_\_\_

SCHOOL NAME\_\_\_\_\_

ADDRESS\_\_\_\_\_

DATES ATTENDED: FROM \_\_\_\_\_ TO \_\_\_\_\_

NAME OF NOMINATOR\_\_\_\_\_

TITLE OF NOMINATOR\_\_\_\_\_

IS NOMINATOR A CURRENT MS-ACTE MEMBER? YES \_\_\_\_\_ NO \_\_\_\_\_

NOMINATOR'S PLACE OF EMPLOYMENT\_\_\_\_\_

ADDRESS\_\_\_\_\_

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NOMINATOR'S

SIGNATURE\_\_\_\_\_

DATE\_\_\_\_\_

**MSACTE OUTSTANDING ALUMNUS AWARD  
EVALUATION FORM**

NAME OF ALUMNUS \_\_\_\_\_

SCHOOL \_\_\_\_\_

LOCATION \_\_\_\_\_

<u>Criteria</u>	<u>Maximum Points</u>	<u>Score</u>
Length of time in program	20	
Completion of program	20	
Worthy contribution(s) to career and technical education after training	20	
Currently working in a field related to career & technical training	20	
Endorsements	20	
<b>Total Points</b>		

EVALUATOR'S INITIALS \_\_\_\_\_

DATE \_\_\_\_\_