

**Leadership Award Nomination Form**

Nominations due March 19, 2021

Please review the VSCA Professional Recognition Awards Guide to ensure that the nominee meets all award criteria and that all nomination steps are completed. Completed Nomination Forms should be uploaded to the Online Awards Portal.

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| **Name of Nominee:** Enter First and Last Name |
| Work Address:Street Address, City, State, Zip | Home Address:Street Address, City, State, Zip |
| Work Phone:xxx-xxx-xxxx | Home/Cell:xxx-xxx-xxxx |
| Work E-mail:Enter work email | Personal E-mail:Enter personal email |

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| Nominee Current Position: Click or tap here to enter text. |
| Brief Description of Nominee’s Job Setting/Demographic Info.Enter Text Here |

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| **Name of Nominator:** Enter First and Last Name |
| Work Address:Street Address, City, State, Zip | Home Address:Street Address, City, State, Zip |
| Work Phone:xxx-xxx-xxxx  | Home/Cell:xxx-xxx-xxxx  |
| Work E-mail:Enter work email | Personal E-mail:Enter personal email |

**In 200 words or less, please explain why you are recommending this person to receive the VSCA Leadership Award. How has he/she advocated for school counseling?**

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| Enter Text Here |

**In 200 words or less, how has this nominee made a difference in the lives of children/families or the school climate/community?**

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| Enter Text Here |