

NATIONAL OUTSTANDING ASSISTANT PRINCIPAL OF THE YEAR AWARD PROGRAM

A Program to Honor Assistant Principals in
Elementary and Middle-Level School Leadership

2020-21 Application

Due: March 19, 2021



~ PROGRAM BACKGROUND ~

The National Association of Elementary School Principals is committed to preparing assistant principals to step into the principal role. Recognition for the exceptional leadership of the men and women who are responsible for the day-to-day operations of pre-K–8 schools instills pride in their accomplishments and reinforces their leadership in helping children develop a lifelong love of learning.

~ CRITERIA ~

- Applicant must be a member of ASA and the National Association of Elementary School Principals at the time of nomination and must maintain membership through June 30, 2021.
- Applicant must be an active assistant principal at the time of nomination.
- Applicant must be an active assistant principal for at least two years.
- Applicant must contribute to the well-being of the educational community.
- Applicant must contribute to a positive and motivating environment for others.
- Applicant must have a strong record of service (in both school and community) and be recognized as a leader.
- Applicant must exhibit exceptional leadership in a particular school program and/or is heavily involved in finding a solution to a problem faced by the school.

~ PROCESS ~

Public and Private school elementary and middle-level assistant principals apply for the award via their state association. Winners will be awarded complimentary registration to NAESP's Pre-K–8 Principals Conference and will be honored during the event.

The 2020-21 program will begin September 2020 and all applications must be submitted by March 26, 2021. To be eligible for this program, applicants must complete the NAESP application and return it to their state affiliate in a timeline established by the state affiliate. **All selected awardees must submit a labeled professional, digital, photograph (a "headshot" with a plain, color background) at 300 dpi to state affiliates once he/she is named.** A roster of 2020-21 award winners will be featured on the NAESP web site.

Application Must be Received by ASA No Later Than March 19, 2021

Email completed application to carmen@azsa.org

**NATIONAL OUTSTANDING ASSISTANT PRINCIPAL
OF THE YEAR AWARD PROGRAM**

APPLICATION FORM

Please type, word process, or print clearly

Name	Prefix	First	Middle Initial	Last	Suffix
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~ **CONTACT INFORMATION • SCHOOL** ~

School Name _____

School Address	Street	City	State	Zip	Country
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School Phone (Include Area Code) _____	School E-Mail _____
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~ **CONTACT INFORMATION • HOME** ~

Home Address	Street	City	State	Zip	Country
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Home Phone (Include Area Code) _____	Home E-Mail _____
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~ **PROFESSIONAL INFORMATION** ~

Professional Experience (List by most recent, excluding current position/school)

Position	Name and Location of School	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Number of Years as an Assistant Principal _____ **Total Number of Years in Current Position/School** _____

Professional Preparation (List by most recent)

Degree	Name and Location of Institution	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

~ SERVICE TO THE COMMUNITY ~

Name of Community Association/Organization	Offices Held / Awards Received	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

~ TWO MOST SIGNIFICANT ACCOMPLISHMENTS AS AN ASSISTANT PRINCIPAL ~

- 1) _____

- 2) _____

TO BE COMPLETED BY APPLICANT'S REFERENCE

***Two letters of reference are required. One must be from the Assistant Principal's Principal or Superintendent.**

APPLICANT'S REFERENCE FORM

~ LETTERS OF REFERENCE ~

Name of Applicant: _____

Each applicant is asked to secure two letters of reference, one from the applicant's supervisor and one selected from the following persons: **superintendent, a fellow administrator, a teacher currently serving on the applicant's staff, or a parent/civic/community leader.** Each letter of reference should include a copy of this form.

To the Applicant's Reference:

The National Outstanding Assistant Principal (NOAP) selection committee appreciates your help in assessing this applicant's skills and knowledge in the area of school leadership. Please base your comments on the applicant's professional performance. Limit your comments to one 8 ½ x 11" page, using at least 10 pt. type. Please seal your completed reference letter in an envelope, place your signature over the seal, and return it to the applicant. If you prefer, your letter of reference may be mailed directly to the applicant's state affiliate or the organization that he/she represents.

This letter of reference is from (please check one):

- | | |
|---|--|
| <input type="checkbox"/> The applicant's supervisor | <input type="checkbox"/> A fellow administrator |
| <input type="checkbox"/> A teacher | <input type="checkbox"/> A parent/civic/community member |

Please print or type.

Printed Name of Reference Title

Address

City State Zip Country if not USA

Phone (including area code) E-Mail Address

Signature of Reference Date

The National Outstanding Assistant Principal program does not discriminate on the basis of race, color, creed, ethnicity, age, religion, county of origin, or sexual orientation.

APPLICANT'S AFFIRMATION STATEMENT

I do hereby affirm that I plan on remaining in a position of school leadership during the 2020-21 school year and I am a member of NAESP.

I do further affirm that the information included in this application packet is a fair and true representation of the facts of my professional career.

I do hereby grant my permission for any or all of the enclosed materials (but excluding my home address, home and/or cell phone number, and home e-mail address) to be shared with persons and organizations interested in promoting the National Outstanding Assistant Principal of the Year Award Program and its honorees.

PRINTED NAME OF APPLICANT: _____

APPLICANT SIGNATURE: _____

DATE: _____

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