GOLDEN APPLE AWARD *2021*
NOMINATION FORM

Name of Teacher Nominee: _____

Nominator's Name: _____

Teacher's School: _____City: _____

Teacher's Email Address: _____

Please indicate: ( ) Student ( ) Parent ( ) Teacher

(If an elementary student nominates a teacher, a parent must also sign the Nomination Form)

Nominator's Address: _____

_____

Nominator's Email: _____

Nominator's Telephone Number: _____

Nominator's Signature: _____

Parent Signature (If student nominated): _____

In a letter of recommendation, explain why you think this teacher deserves a *Golden Apple Award.* Please give specific examples of the individual's unique qualities and teaching ability. We appreciate your help in recognizing the dedication to service, professionalism and leadership our teachers demonstrate every day in classrooms throughout the Diocese of Toledo.

Thank you for taking the time to nominate a Catholic teacher that you feel is outstanding and deserving of this prestigious award.

RETURN THIS FORM AND YOUR LETTER OF RECOMMENDATION TO THE SCHOOL PRINCIPAL BY MARCH 1, 2021. Thank you.