

# CLEAR LEARNING SYSTEM

Teacher of the Year Award Nomination Form



Who are you nominating?

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Will this person be able to attend the National Convention? \_\_\_\_\_

What church does he or she attend?

Church: \_\_\_\_\_

Church Address: \_\_\_\_\_

What age level does he or she teach?

Preschool  Elementary  Junior High  Senior High  Young Adult  Adult

## QUESTIONS TO BE ANSWERED BY PASTOR OR SUNDAY SCHOOL

### SUPERINTENDENT/CHRISTIAN EDUCATION DIRECTOR:

Does he or she use CLEAR Sunday School curriculum?

How does your teacher capture the interest of students and relate to them on their level?

What has your teacher done to become more knowledgeable and skilled in teaching and applying the Word of God? (Workshops, TEAM Church, D6 Conference, etc.)

What does your teacher do outside the classroom to help students grow in spiritual maturity and Christian service?

How well does this teacher support the overall ministry of the church? Give examples.

How well does this teacher support the ministry philosophy of the church?

Do you personally endorse the nomination of this person for Teacher of the Year?

Do you have any other information that will be beneficial to us in evaluating this nomination? Please use the space below for comments.

**Your information:**

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Title: \_\_\_\_\_

Senior Pastor \_\_\_\_\_

Christian Education Director \_\_\_\_\_

Sunday School Superintendent \_\_\_\_\_

Other: \_\_\_\_\_