

CAJON VALLEY EDUCATION FOUNDATION

Stars in Education 2009

March 19, 2009

NOMINATION FORM

Name of Nominee _____

Job Title _____

Name of Organization (Business Partner or Volunteer) _____

This person is in the following category (please check below:

- Administrative Business Partner Classified Volunteer Certificated
(Certificated/Classified) (including Supervisory)

Phone Number: _____

E-mail: _____

Department/School: _____

Address:
(if Business Partner or Volunteer) _____

Nominated By: _____

Describe the nominee's characteristics and/or actions that warrant consideration for this award:

Describe significant contributions this nominee has made beyond normal job duties or expectations:

For Certificated Nominees Only: Describe how this nominee exemplifies the teaching profession:

Please write any additional comments that could be helpful in describing your nominee:

**Please return nomination form by February 20.
Send to Education Foundation c/o Superintendent's Office.**