

**NOMINATION FOR REGION 10 "TEACHER OF THE YEAR" 2020**

**APPLICATION**

\_\_\_\_\_  
Name of Nominee

\_\_\_\_\_  
School

**The more details one provides, the more evidence the committee has to make its selection. You may attach information to this form if you wish.**

Please answer the following questions which relate to the criteria established by the State Department of Education for the Connecticut Teacher of the Year Program. It would be helpful if you would take the time to be specific and complete in your answers.

1. In what ways has the nominee demonstrated an unusual level of talent and accomplishment as a teacher in the classroom?

