Southeast Region
Ohio School Boards Association
Region Recognition Program
Nomination Form

_____ Outstanding student program (may be curricular or extra-curricular)
_____ Outstanding male student (***not currently a high school senior***)
_____ Outstanding female student (***not currently a high school senior***)
_____ Outstanding faculty member
_____ Outstanding classified staff member
_____ Outstanding treasurer
_____ Outstanding volunteer
_____ Outstanding administrator
_____ Outstanding new program or innovation

I would like to nominate _____ from our school to be recognized as being outstanding in one of the above categories.

Describe the nominee: (include outstanding qualities, relations to school and other background information. Please limit endorsements to three.)

_____

_____

_____

_____

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_____

_____

_____

**attach extra sheet, if necessary*

_____
Signature of Nominator

Name of Nominator _____ Telephone:_____

School _____ School District_____ County _____

Please return this form by June 30, 2008 to:
Paul D. Mock, Regional Secretary
Ohio School Boards Association
685 East Main Street
Logan, OH 43138-1737
Phone: (740) 385-5240
Fax: (740) 380-2487