

# Utah Association of Educational Office Professionals

Nomination Form  
for  
UAEOP Office Professional of the Year



## PLEASE READ CAREFULLY AND FOLLOW THE GUIDELINES

Nomination form must be postmarked by **October 31** and mailed to: Charlotte Graham, UAEOP Awards Chairman, East Midvale Elementary, 6990 South 300 East, Midvale UT 84047.

1. Either an administrator or an office professional may nominate a candidate.
2. Candidates may be nominated individually or as a representative from an individual school district.
3. Two (2) copies of the application and three (3) letters of recommendation must be submitted. Applications or accompanying materials will not be returned.
4. All candidates and the sponsoring individual association/school district will be notified immediately after the judges' decision.
5. The recipient will be honored at the annual UAEOP Conference to be held in March.

### Eligibility

1. A candidate must currently be employed as an educational office professional (i.e., secretary, clerk, accountant, bookkeeper, registrar, etc.) in an educational institution agency, public or private school, college or university, for a minimum of five (5) years.
2. A candidate must be a member of the Utah Association of Educational Office Professionals.

### Criteria for Judging

- |                                                                                       |     |
|---------------------------------------------------------------------------------------|-----|
| 1. Recommendation from sponsoring individual association/school district.....         | 30% |
| 2. Membership leadership roles in professional and non-professional associations..... | 15% |
| 3. Community activities.....                                                          | 10% |
| 4. Interest shown in the development of professional efficiency .....                 | 15% |
| 5. Letters of recommendation (maximum of three [3]).....                              | 30% |

Note: If you have any questions, please contact Charlotte Graham, Awards Chairman, at 801.826.8352 (wk).

UAEOP Office Professional of the Year Nomination Form

Name of Candidate \_\_\_\_\_

Address \_\_\_\_\_

Street

City

State

Zip

Telephone (home) \_\_\_\_\_ (work) \_\_\_\_\_

Employer \_\_\_\_\_ Location \_\_\_\_\_

(School, College, Other Educational Office)

(School, Department, etc.)

Supervisor \_\_\_\_\_ Title \_\_\_\_\_

Name of Nominator \_\_\_\_\_

1. What contribution has the nominee made to the education system in your district?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. What qualities set this employee apart from his/her peers?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. What kind of professional efficiency and initiative does the nominee exhibit in job performance?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. List community involvement and leadership positions held by nominee both professional and non - professional.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Why are you nominating this person?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_