



**ALABAMA**  
**FFA FOUNDATION**

# Teacher Recognition Program

## Nominee Information

Name:

FFA Chapter:

Number of Years Teaching:  Phone:

Email:

District:

## Nominator Information

Name:

Email:  Phone Number:

Relationship to Nominee:

## Please select the award for which you are nominating:

**New Teacher of the Year**

Recognizes teachers in their first five years of teaching who demonstrate excellence in agricultural education and leadership.

Award: \$500 check for the chapter and a plaque for the teacher.

**Advisor of the Year**

Recognizes one teacher per year per district. Advisors are eligible to receive this award **once** in their career. Recognizes teachers who demonstrate excellence in agricultural education and leadership both inside and outside of the classroom .

Award: \$500 check for the chapter and a plaque for the teacher.

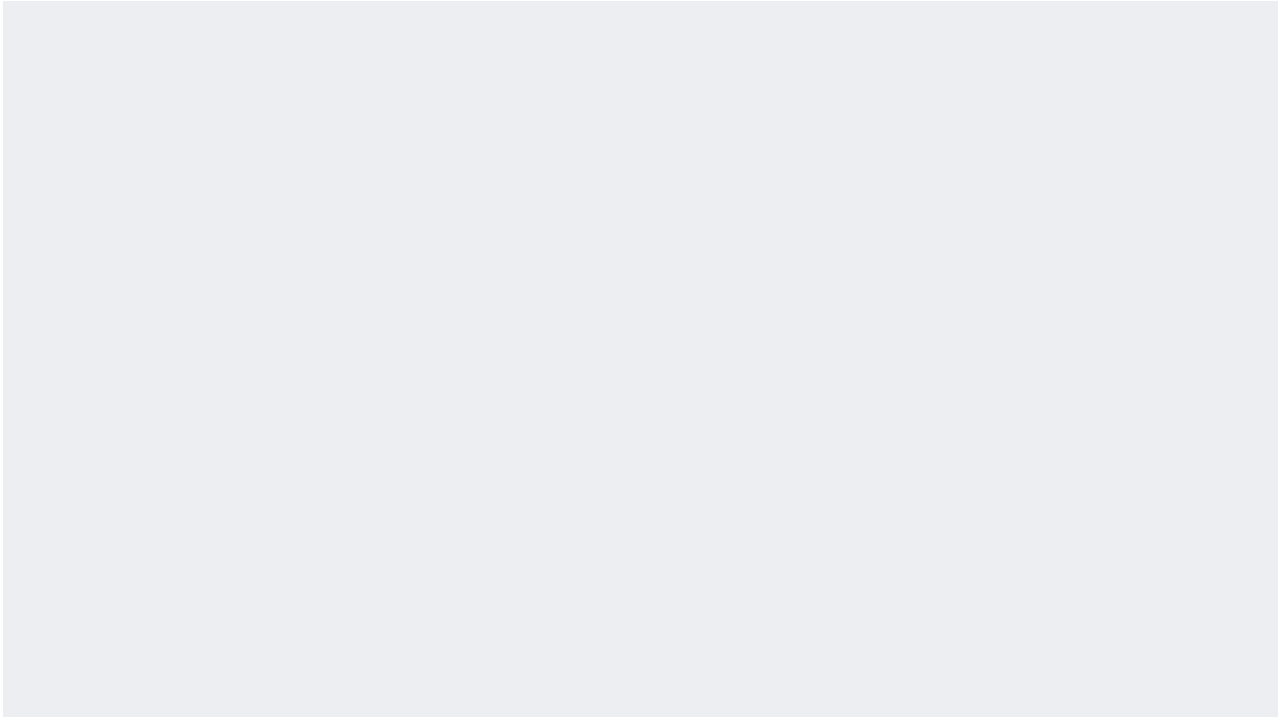
**Golden Owl Award**

Recognizes a teacher who throughout their career has demonstrated excellence in agricultural education both in and out of the classroom. The Golden Owl Award was created to recognize many years of service and leadership to Alabama FFA. Advisors are eligible to receive this award once in their career.

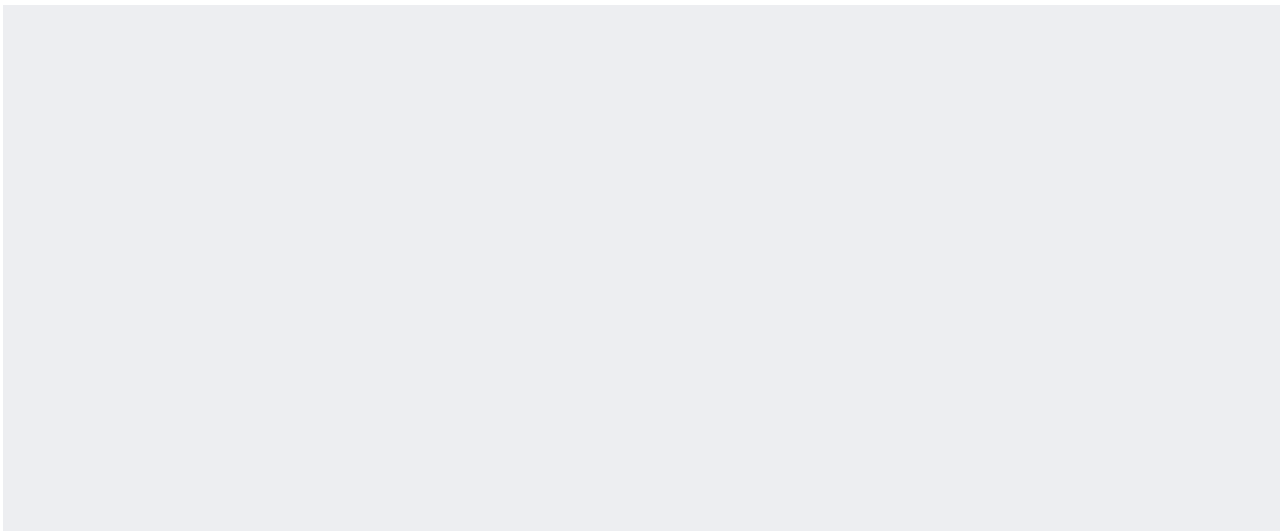
Award: \$500 check for the chapter and a golden and sapphire owl to be worn as a pin or pendant.

**Application:**

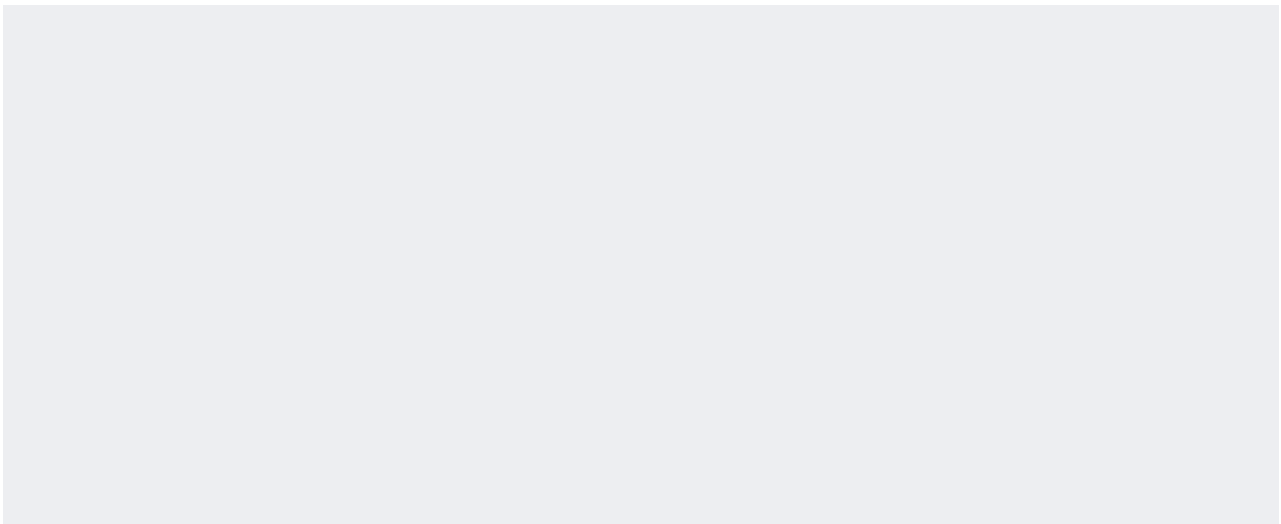
Describe the major accomplishments of your FFA Chapter in the recent years. *Examples may include number of state and American degrees, state and national winners or finalists, district and state officers.*



How does the nominee encourage and support members SAEs (supervised ag experiences)?



How does the nominee support members and officers to achieve success outside daily classes?



Explain why the nominee deserves this award:

A large, empty light gray rectangular area intended for writing an explanation. It occupies the majority of the page below the question.

**Certification:**

FFA Chapter Representative Name: .....

FFA Chapter Representative Signature: .....

Date: .....

School Administrator Name: .....

School Administrator Signature: .....

Date: .....

Note: Additional letters of support may be included, but are not required.

**Submission Information:**

Completed applications should be sent to [finance@alabamaffa.org](mailto:finance@alabamaffa.org) and must be received by April 15 to be considered for the following convention.