



2019 California Teacher of the Year

Nomination Interest Form

Name:	
Preferred Designation	<input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Dr.
Home Address:	
City:	
Telephone:	Home: Mobile: Work:
Email address(es)	Work: Personal:
Best Day/Time of Day to reach you:	
Total Years Teaching Experience:	
Years in current position:	
Major subject area(s), if any:	
Grade levels currently taught:	
Credentials:	
Degrees:	
Superintendent Name:	
Superintendent Signature	

You will need to submit:

1. This application
2. No more than one page answering the following four questions about education. The essay should be typed in a 12-point font and may be single spaced.
 - Give a brief description of your experience in your district.
 - How have you demonstrated educational leadership in your school or district?
 - What have you done to increase student achievement in your classroom or school?
 - Describe how you contribute to the success for your grade level, department or school.
3. Two current letters of support ne from your principal and one from your superintendent.

Please return all material by: May 4, 2018 – 5:00pm

**Raquel Rose, Assistant Superintendent
Marin County Office of Education
PO Box 4925
San Rafael, CA 94913**