

**SOCIAL STUDIES PROGRAMS OF EXCELLENCE AWARD
ENTRY COVER PAGE**

Please type or print all information.

Program Title

Name of Institution (school, district, university)

Address:

City:

State:

Zip:

Name of Program Coordinator:

Title:

Home Address:

City:

State:

Zip:

Home Telephone (with area code)

E-mail

Name of Nominator:

Address:

City:

State:

Zip:

Telephone (with area code)

E-mail

Please attach the Program Coordinator's resume or curriculum vita to this page.

Program Category (Check One):

District (K-12)

Senior High

Elementary (generally K-6)

Social Studies Teacher

Education

Middle/ Junior High

Preservice

Inservice

Non-commercial organizations/agencies or institutions in ongoing association with the above.

Signature of Nominator

Date

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Teacher Participants. List the names of *all* teachers participating in the nominated program.
Attach additional sheet(s) as necessary.

Name Teaching Assignment

Please list below the names, titles, and addresses of those you wish notified if your program is selected for a Social Studies Programs of Excellence Award. You may wish to include your superintendent, state and local policy makers, community leaders, and local media. Attach additional sheets as necessary.

Name:

Title:

Address:

City:

State:

Zip:

Telephone:

Name:

Title:

Address:

City:

State:

Zip:

Telephone:

Name:

Title:

Address:

City:

State:

Zip:

Telephone: