

The NEA Foundation Awards for Teaching Excellence Data Sheet

State, Federal, or Direct Affiliate Information

President: _____
Affiliate Name: _____
Address: _____
City: _____ State: _____ Zip _____
Telephone: _____ Fax: _____ Email: _____

Awardee Information

Awardee: _____
Home Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ Fax: _____ Email: _____
School/Institution: _____
Work Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ Fax: _____ Email: _____
Job Title: _____
For teachers, what do you teach? Subject(s) _____ Grade(s): _____

Awardee Information Request: How would you describe yourself? Choose one or more from the following ethnic or racial groups:

American Indian ____ Asian ____ Black or African American ____
Hispanic or Latino (A person of Spanish culture or origin, regardless of race) ____
Native Hawaiian or Other Pacific Islander ____ White or Caucasian ____
Other (please specify) _____ Prefer not to answer ____

Awardee's Employer Information

Superintendent or Institution President: _____
District or Institution: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ Fax: _____ Email: _____
Principal or Dean: _____
School or College: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ Fax: _____ Email: _____

Local Affiliate Information

President: _____

Affiliate Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____ Email: _____

School/Institution: _____