

STANDARDIZED VITA FORM

PLEASE TYPE OR PRINT

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An awards committee will review the information on this form along with nomination and recommendation letters. This will be a blind review. All nominees will be informed of the results following the review. Winners will be published in the fall edition of the *MAEA Gazette*. Please be sure to include a quality photo for publication. Photos will not be returned.

Name _____
(Dr. Mrs. Mr. Ms.) Last First M.I.

Award for which nominated _____
Print exact title as the appear in the MAEA Gazette – State or regional/Division

Home Address _____
Street/PO Box Apt.# City State zip+4

Title (currently employed as) _____

Work Address _____
School/Building Street/PO Box City State zip+4

Home Phone () _____ Work Phone () _____ E-mail _____

List degrees held, Institution(s) and other education:

List NAEA activities on the national and regional level including offices held, committees, honors, presentations etc.:

List MAEA activities on the state and local level including offices held, committees, honors, presentations etc.:

List other leadership roles and accomplishments:

List membership in other professional organizations, including offices held, honors, etc.:

List publications and/or exhibits:

List other teaching or related experiences: