

## **GUIDELINES FOR AWARDS AND SCHOLARSHIPS**

**A.** All officers, with Vice President of Awards and Recognition being in charge, will assist in disseminating information to the membership, including application/nomination timelines, and supply nomination forms on request.

**B.** To insure quality, consistency and continuity, the Vice President for Awards and Recognition or the Executive Assistant, if employed, will secure all certificates, plaques, etc., for presentation at the annual meeting. Funding for awards is a part of the annual meeting budget.

**C.** Following the annual meeting, the Vice President for Awards and Recognition or the Executive Assistant, if employed, will record the recipients' names in the permanent records.

**D.** The awards budget should be presented to the President at the Fall Executive Board Meeting by the responsible officers and should include:

1. Printing or purchasing of certificates
2. Purchasing or cost of framing
3. Purchasing and engraving of plaques
4. Any expense associated with presentation of awards

### **SUMMARY OF AWARDS AND SCHOLARSHIPS**

Nominees can request applications in electronic format from the VP for Awards and Recognition.

#### **AAFCS FIRST TIMER SCHOLARSHIP**

Awarded to a GAFCS member attending the AAFCS Annual Meeting for the first time. Award covers partial cost of registration. Application form must be completed. Awarded at the GAFCS Annual Meeting.

#### **GAFCS FIRST TIMER SCHOLARSHIP**

A GAFCS member attending the GAFCS Annual Meeting for the first time receive the value of the registration fee. Application required. Recipient is selected by drawing from eligible registrants at the Annual Meeting and announced at Annual Meeting.

#### **GAFCS FIRST TIMER PRE-PROFESSIONAL/GRADUATE STUDENT SCHOLARSHIP**

A GP/GS member attending GAFCS Annual Meeting for the first time receives the value of the registration fee. The recipient is selected by a drawing from eligible registrants at the annual meeting and is announced at the Annual Meeting..

## Appendix C (Guidelines for Awards and Scholarships) to the GAFCS Handbook

### **GAFCS SILVER CIRCLE AWARD**

Recognizes GAFCS members with 25 consecutive years of membership in AAFCS as of the end of the month in which the GAFCS annual meeting is held. A special certificate designed with a silver foil logo is presented at the GAFCS Annual Meeting.

### **GAFCS GOLDEN CIRCLE AWARD**

Recognizes GAFCS members with 50 consecutive years of AAFCS membership as of the end of the month in which the GAFCS annual meeting is held. GAFCS presents a gold-plated Betty Lamp Pin to each recipient. Recipients are recognized at the GAFCS Annual Meeting Vice and at the AAFCS Annual Meeting.

### **GAFCS UNDERGRADUATE STUDENT MEMBER SCHOLARSHIP**

Any GP/GS member (undergraduate only) is eligible. Application required. The \$500 is awarded at the GAFCS Annual Meeting by the Scholarship Liaison. (See Appendix C for application)

### **GAFCS GRADUATE SCHOLARSHIP**

Any GAFCS member desiring to engage in a personal improvement project which will enable the individual to develop and share communication and public relations skills which exemplify the goals of GAFCS. The \$500 is awarded at the GAFCS Annual Meeting. (See Appendix C for application)

### **JULIUS BENTON PROFESSIONAL IMPROVEMENT AWARD**

Any GAFCS member desiring to engage in a personal improvement project which will enable the individual to develop and share communication and public relations skills which exemplify the goals of GAFCS. The \$500 is awarded at the GAFCS Annual Meeting. (See Appendix C for application)

### **OUTSTANDING PROGRAM OF WORK OF YEAR**

Award is determined by review of program of work and end of year report submitted. This award (\$25 certificate) is presented at the GAFCS Annual Meeting.

### **AAFCS NEW ACHIEVER AWARD NOMINEE**

Any family and consumer sciences professional who is age 35 or younger and is an active member of GAFCS/AAFCS is eligible. The award identifies and honors emerging family and consumer sciences professionals with the potential for achieving significant accomplishments in or through family and consumer sciences. The nominee should be active in GAFCS/AAFCS and promote the active participation of Family and Consumer Sciences professionals. Timeline:

1. District nominations are sent to Vice President for Awards and Recognition by November 15.
2. Vice President for Awards and Recognition selects a committee to determine GAFCS nominee; application is sent to nominee by December 1.
3. The nominee will complete the AAFCS application and submit it to the Vice President for Awards and Recognition by January 5.
4. The state nominee is recognized at the GAFCS Annual Meeting. The national winner is recognized at the AAFCS Annual Meeting.

## Appendix C (Guidelines for Awards and Scholarships) to the GAFCS Handbook

### **AAFCS LEADER AWARD NOMINEE**

Any living family and consumer sciences professional over age 35 who is an active GAFCS/AAFCS member is eligible. Nominees should be respected and known by peers, and have made significant contributions to the profession and association. Timeline:

1. District nominations are sent to Vice President for Awards and Recognition by November 15.
2. Vice President for Awards and Recognition selects a committee to determine GAFCS nominee; application is sent to nominee by December 1.
3. The nominee will complete the AAFCS application and submit it to the Vice President for Awards and Recognition by January 5.
4. The state nominee is recognized at the GAFCS Annual Meeting. The national winner is recognized at the AAFCS Annual Meeting.

### **WILLEY-BERGER AWARD FOR VOLUNTARY SERVICE**

This award honors an outstanding volunteer whose work has enhanced the well-being of others. It posthumously honors Davis R. Wiley, D. Reid, and Anges Miller Berger for their outstanding contribution to family and consumer sciences.

At the national level, the recipient receives a cash award of \$1000 and a commemorative plaque.

### **GAFCS OUTSTANDING FAMILY AND CONSUMER SCIENCES PROFESSIONAL**

Any family and consumer sciences professional who has demonstrated outstanding contributions to GAFCS and AAFCS at the district, state and national levels is eligible for this award. (*See guidelines on next page*). Timeline:

1. District/Section nominations are sent to Vice President for Awards and Recognition by November 1.
2. Vice President for Awards and Recognition sends nominees' application by December 1.
3. Four copies of the application are submitted to the Vice President for Awards and Recognition by January 5.
4. The Vice President for Awards and Recognition sends 3 external evaluators the applications by January 15.
5. External committee submits results to Vice President for Awards and Recognition by February 15.
6. The state nominee is recognized at the GAFCS Annual Meeting.

### **AAFCS TEACHER OF THE YEAR AWARD**

The Affiliate Teacher of the year competition is directed and administrated at the state level by each AAFCS Affiliate. Each participating Affiliate selects its own Teacher of the Year. The Affiliate may then choose to enter its Teacher of the Year in the national competition. At the national level, ten (10) semifinalist are selected for the National TOY Award. From the Top Ten Finalist, the National Teacher of the Year Award recipient is then selected. (See Appendix C for application)

#### **1. Number of Awards**

One award will be given out each year

**Award Guidelines,  
Nomination, Application Forms,  
and Evaluation Criteria  
As Required**

Appendix C (Guidelines for Awards and Scholarships) to the GAFCS Handbook  
**GEORGIA ASSOCIATION OF FAMILY & CONSUMER SCIENCES**  
**Annual Meeting**  
**First Timer Scholarship**  
**Member and Pre-Professional/Graduate Student**  
**Application Form**

**Name** \_\_\_\_\_ **Date** \_\_\_\_\_

**Address** \_\_\_\_\_

\_\_\_\_\_

**Hone Phone** \_\_\_\_\_ **Work Phone** \_\_\_\_\_

**Cell Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

**AAFCS Member Number** \_\_\_\_\_

**Number of years member of AAFCS/GAFCS** \_\_\_\_\_

**Request for Annual Meeting located in** \_\_\_\_\_

\_\_\_\_\_

**Signature**

**Approved by:** \_\_\_\_\_

**Signature of VP for Awards and Recognition**

**Date** \_\_\_\_\_

**Monetary Award** \$ \_\_\_\_\_

**GAFCS Check #** \_\_\_\_\_

**CONSUMER SCIENCES**  
**Undergraduate Student Scholarship Application**

**ABOUT THE SCHOLARSHIP:**

**An Annual award of \$500 is given to any undergraduate student who is a FAFCS Pre-professional/Graduate Student Member enrolled in an undergraduate program.**

**SELECTION CRITERIA:**

- **Scholastic record**
- **Participation in field of Family & consumer Sciences and GAFCS Student Association**
- **Financial need**
- **All around future promise in field**
- **Letter of recommendation**

**Final selection is made by a committee selected by a committee selected by the Scholarship Liaison.**

**APPLICATION PROCEDURES:**

**Complete the attached form or utilize the same format when using a computer. Send one copy to the GAFCS VP for Awards and Recognition.**

Appendix C (Guidelines for Awards and Scholarships) to the GAFCS Handbook  
**Undergraduate Student Member Scholarship**

**Today's Date** \_\_\_\_\_

**Name** \_\_\_\_\_

—

**College Address** \_\_\_\_\_

\_\_\_\_\_

—

**Parents' Names** \_\_\_\_\_

**Parents' Address** \_\_\_\_\_

**Name of college presently attending:** \_\_\_\_\_

**Present Classification** \_\_\_\_\_ **Years at this Institution** \_\_\_\_\_

**Names of previous college attended (if applicable)** \_\_\_\_\_

**Years at previous institutions** \_\_\_\_\_

**Name of college you plan to transfer to (if applicable):** \_\_\_\_\_

**GAFCS Pre-Professional Graduate Student member?** \_\_\_\_Yes \_\_\_\_No

**AAFCS Member #** \_\_\_\_\_ **Current College Major** \_\_\_\_\_

**Will scholarship be used at present college?** \_\_\_\_Yes \_\_\_\_No

**If answer is no, where will it be used?**

**Briefly explain why you need scholarship help.**

**What is the field of your major professional interest?**

**How long after graduation do you plan to remain in professional service?**

**List your participation in Family & Consumer sciences related activities at the college level. If transfer student, list present college activities first.**

**List your participation in Family & Consumer sciences related activities in high school.**

**Attach the following:**

**A brief description of you, your family, your interests, and experiences which led you to choose a career in Family & consumer Sciences.**

**A letter of recommendation written by the Head of the Department or the Dean of the College/School of Family & Consumer Sciences. A summary of the entrant's participation in Family & consumer Sciences and other college activities should be included. If the entrant is a transfer student, the letter may be from the transfer school.**

**To be completed by department or dean:**

**Entrant's academic rating:**

## **GEORGIA ASSOCIATION OF FAMILY & CONSUMER SCIENCES Graduate Scholarship Application**

### **ABOUT THE SCHOLARSHIP**

**An annual award of \$500 is given to a GAFCS member working toward an advanced degree. Members do not have to be currently enrolled in a college or graduate program to apply.**

### **SELECTION CRITERIA:**

- **Scholastic record**
- **AAFCS/GAFCS participation**
- **Other professional and civic activities**
- **Financial need**
- **All around future promise**
- **Expectations of a continuing career in the field of Family & Consumer Sciences**

**Final selection is made by a committee selected by the VP for Awards and Recognition.**

### **APPLICATION PROCEDURES:**

**Complete the attached form or utilize the same format when using a computer. Send on copy to the GAFCS VP for Awards and recognition.**

**GEORGIA ASSOCIATION OF FAMILY & CONSUMER SCIENCES  
Graduate Scholarship Application**

**Today's Date** \_\_\_\_\_ **AAFCS Membership  
Number** \_\_\_\_\_

**Name** \_\_\_\_\_

—

**Home Address** \_\_\_\_\_

**Business  
Address** \_\_\_\_\_

**Colleges Attended      Years      Major      Degrees      Mo      Yr**

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**AAFCS/GAFCS Activities: (such as offices, committees, awards, out-of-state travel)**

**During College**

**After College (if applicable)**

**Recognition, honors, prizes, etc (Including National honor Societies)**

**Other professional and Civic Activities**

**During College**

**After College (if applicable)**

**How was your undergraduate education financed?**

**How do you plan to finance further study?**

**What is your collegiate scholastic rating, GPA? \_\_\_\_\_**  
**On a \_\_\_\_\_ point scale.**

**Why are you interested in graduate work?**

**How do you propose to contribute to the field of Family & consumer Sciences on the completion of your graduate work?**

**Employment Record: (Start with present or latest position. Include part-time work)**

<u>Name of Employer</u>	<u>Dates employed</u>	<u>Nature of Work</u>
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**The college or university selected by the awardee must be an accredited institution and meet with the approval of the Scholarship Committee.**

**If awarded the GAFCS Scholarship, my college preference would be:**

**I have been admitted to this institution \_\_\_\_\_yes \_\_\_\_\_no**

**I plan to begin graduate study \_\_\_\_\_(date)**

**Proposed field of study:**

Appendix C (Guidelines for Awards and Scholarships) to the GAFCS Handbook

**REFERENCES: Attach four letters of recommendation. At least one of these letters should be written by a GAFCS member and at least one reference should be a member of a college faculty familiar with your work.**

**Other references may include pastors, employers, business associates, etc.**

**Applications will not be judged without four letters of recommendations.**

**GEORGIA ASSOCIATION OF FAMILY & CONSUMER SCIENCES  
Julius Benton Professional Improvement Award**

**Recipient will present at a session of the next annual meeting of GAFCS or prepare a report for the Newsletter as requested by the awards committee.**

**Today's Date** \_\_\_\_\_ **AAFCS Member Number** \_\_\_\_\_

**Name** \_\_\_\_\_

—

**Home Address** \_\_\_\_\_

—

**Business Address** \_\_\_\_\_

—

**Length of AAFCS Membership** \_\_\_\_\_ **Length of GAFCS Membership** \_\_\_\_\_

**Colleges Attended**      **Years**      **Major**      **Degrees**      **Mo**      **Yr**

**Employment Record: (Start with present or latest position. Include part-time work)**

**Name of Employer**      **Dates**      **Nature of Work**

**Personal, professional and Civic Experiences**

**AAFCS-GAFCS activities (Such as offices, committees, awards, out-of-state Travel)**

**Recognition, Honors, Prizes, Etc. (Including national honor societies)**

**Other Professional and Civic Activities**

**Narrative materials (use additional paper to respond)**

**A description by the applicant of proposed plans for individual improvement.**

**This should be specific and include information regarding total cost and time involved. A description of how this will contribute to GAFCS should be included. This narrative should conclude with a summary of the individuals' future plans.**

**Letters of recommendation**

**Attach three letters of recommendation. The persons providing a recommendation should address the likelihood of this individual's continuing a career in the field of Family & Consumer Sciences.**

**Applications will not be judged without three letters of recommendation.**

**Statements**

**Please attach one of the following:**

- 1. A statement from the applicant's employer that permission to participate in the proposed project would be granted.**

**Or**

Appendix C (Guidelines for Awards and Scholarships) to the GAFCS Handbook

**2. A statement from applicant that should award be received, GAFCS would be notified within two weeks if employer approval has been obtained and that applicant would decline awarded if such approval is not available.**

**Or**

**3. A statement form the applicant that this improvement project (experience) could be completed in a way requiring no release of time or aid from employer.**

**GEORGIA ASSOCIATION OF FAMILY & CONSUMER SCIENCES  
AAFCS New Achievers Award**

**Nominating  
Group/Individual** \_\_\_\_\_

**Contact Person** \_\_\_\_\_

**Address** \_\_\_\_\_

\_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Work  
Phone** \_\_\_\_\_

**Cell Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

**AAFCS Membership #** \_\_\_\_\_

**Nominee** \_\_\_\_\_

**Address** \_\_\_\_\_

\_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Work  
Phone** \_\_\_\_\_

**Cell Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

Appendix C (Guidelines for Awards and Scholarships) to the GAFCS Handbook

**AAFCS Membership #** \_\_\_\_\_

**Birthdate** \_\_\_/\_\_\_/\_\_\_ **# of Years of Service to the Field:** \_\_\_\_\_

**GEORGIA ASSOCIATION OF FAMILY & CONSUMER SCIENCES  
AAFCS New Achievers Award**

**Application is available in the Fall at  
[www.aafcs.org](http://www.aafcs.org)**

**GEORGIA ASSOCIATION OF FAMILY & CONSUMER SCIENCES  
AAFCS Leaders Award**

**Nominating  
Group/Individual** \_\_\_\_\_

**Contact Person** \_\_\_\_\_

**Address** \_\_\_\_\_

\_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Work  
Phone** \_\_\_\_\_

**Cell Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

**AAFCS Membership #** \_\_\_\_\_

**Nominee** \_\_\_\_\_

**Address** \_\_\_\_\_

\_\_\_\_\_

Appendix C (Guidelines for Awards and Scholarships) to the GAFCS Handbook

**Home Phone** \_\_\_\_\_ **Work**

**Phone** \_\_\_\_\_

**Cell Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

**AAFCS Membership #** \_\_\_\_\_

**Birthdate** \_\_\_/\_\_\_/\_\_\_ **# of Years of Service to the Field:** \_\_\_\_\_

**GEORGIA ASSOCIATION OF FAMILY & CONSUMER SCIENCES  
AAFCS New Achievers Award**

**Application is available in the Fall at**

**[www.aafcs.org](http://www.aafcs.org)**

**GEORGIA ASSOCIATION OF FAMILY & CONSUMER SCIENCES  
AAFCS WILEY –BERGER AWARD FOR VOLUNTARY SERVICE**

**Nominating  
Group/Individual** \_\_\_\_\_

**Contact Person** \_\_\_\_\_

**Address** \_\_\_\_\_

\_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Work  
Phone** \_\_\_\_\_

**Cell Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

**AAFCS membership #** \_\_\_\_\_

**Nominee** \_\_\_\_\_

**Address** \_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Work**  
**Phone** \_\_\_\_\_

**Cell Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

**AAFCS Membership #** \_\_\_\_\_

**Birthdate** \_\_\_/\_\_\_/\_\_\_ **# of Years of Service to the Field:** \_\_\_\_\_

**GEORGIA ASSOCIATION OF FAMILY & CONSUMER SCIENCES**  
**AAFCS WILEY-BERGER AWARD FOR VOLUNTARY SERVICE**

**Application is available in the Fall at**  
**[www.aafcs.org](http://www.aafcs.org)**

## **GUIDELINES FOR OUTSTANDING FAMILY AND CONSUMER SCIENCES PROFESSIONAL AWARDS**

**1. Number of Awards**

The number of awards made in any one year may not exceed 1% of the professional membership on February 1.

**2. Eligibility and Judging Criteria**

- a.** Nominations may be made by each district to recognize any GAFCS member(s), regardless of district or section affiliation.
- b.** Each nominee must have been a member of the **Georgia** affiliate of AAFCS for a minimum of two years in Georgia.
- c.** Individuals may be nominated in more than one year, but can receive this award only one time.

**3. Judging**

Applications will be judged by a committee of three AAFCS members, external to GAFCS. This committee will be appointed by the Vice President for Awards and Recognition. Nominees' names and photos will be removed from the application before judging. Judging criteria include:

- a.** number of years membership (in relation to the number of years eligible for membership in GAFCS)

Appendix C (Guidelines for Awards and Scholarships) to the GAFCS Handbook

b.	district involvement in GAFCS	30%
c.	state involvement in GAFCS	30%
d.	national involvement with AAFCS	20%
e.	service and other professional organizations; community activities	10%
<b>TOTAL</b>		<b>100%</b>

**4. Timetable**

- a. **November 15:** Nominations must be postmarked and mailed to the Vice President for Awards and Recognition.
- b. **December 1:** The Vice President for Awards and Recognition asks nominees to complete an award application form. The District Chair will submit to the Vice President for Awards and Recognition a cover letter supporting the nomination.
- c. **January 5:** Four copies of the completed award application form must be postmarked and mailed to the Vice President for Awards and Recognition.
- d. **January 15:** The Vice President for Awards and Recognition submits application to external judging committee for selection of GAFCS Outstanding Family and Consumer Sciences Professional.
- e. **February 15:** Deadline for external committee to submit results to Vice President for Awards and Recognition.
- f. **At Annual Meeting:** Award announcements and presentations made.

**GEORGIA ASSOCIATION OF FAMILY &  
CONSUMER SCIENCES PROFESSIONAL AWARD**

**APPLICATIONS PROCEDURE:** Your application must be completed on this form. Do not attach additional pages or other supporting information. Return two copies of this completed form to GAFCS Vice President for Awards and Recognition by February 1. Please attach a black and white glossy photograph of yourself.

Name \_\_\_\_\_

Home address \_\_\_\_\_

Present Position and Title \_\_\_\_\_

Business  
Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Appendix C (Guidelines for Awards and Scholarships) to the GAFCS Handbook

GAFCS District \_\_\_\_\_

GAFCS Professional Section \_\_\_\_\_

I. PROFESSIONAL BACKGROUND

A. Educational Background:

<u>Degree</u>	<u>Institution</u>	<u>Location</u>	<u>Dates Attended</u>	<u>Degree</u>
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B. Employment Background:

Appendix C (Guidelines for Awards and Scholarships) to the GAFCS Handbook

Name of your current employer\_\_\_\_\_

Name of your immediate supervisor/manager\_\_\_\_\_

Address\_\_\_\_\_

Telephone number\_\_\_\_\_ Email\_\_\_\_\_

Name of your local newspaper\_\_\_\_\_

Address\_\_\_\_\_

Telephone number\_\_\_\_\_ Email\_\_\_\_\_

**II. CONTRIBUTIONS TO AND INVOLVEMENT WITH GAFCS-AAFCS:**

A. Number of years since receiving Family & Consumer Sciences Degree\_\_\_\_\_

B. Number of years as a GAFCS member\_\_\_\_\_

C. Number of years in other State AAFCS\_\_\_\_\_

**III. GAFCS INVOLVEMENT FOR THE PAST TEN YEARS:**

List activities performed in the name of GAFCS and your professional section (offices, committees, projects, honors, awards, professional meeting attendance.) List current first year. Do not include your job description or activities performed as a part of your daily routine at work.

A. District Involvement (past ten years):

Number of meetings attended\_\_\_\_\_ Meetings held\_\_\_\_\_

Other involvement:

Appendix C (Guidelines for Awards and Scholarships) to the GAFCS Handbook

**B. State GAFCS Involvement (past 10 years)**

**Number of Annual Meetings Attended \_\_\_\_\_ Meetings Held \_\_\_\_\_**

**Additional involvement**

**C. National involvement (past ten years)**

Appendix C (Guidelines for Awards and Scholarships) to the GAFCS Handbook

**Number of Annual Meetings Attended**\_\_\_\_\_ **Meetings held**\_\_\_\_\_

**Other Involvement:**

**IV. Service in other professional organizations and community activities:**

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

**Outstanding Georgia Family and Consumer Sciences Professional  
Judging Criteria**

Nominee \_\_\_\_\_

**District involvement in GAFCS (30%)** \_\_\_\_\_

**State involvement in GAFCS (30%)** \_\_\_\_\_

**National involvement with AAFCS (20%)** \_\_\_\_\_

**Number of years GAFCS membership in relation  
To years eligibility (10%)** \_\_\_\_\_

**Service and other professional organizations,  
Community activities (10%)** \_\_\_\_\_

**Total** \_\_\_\_\_

**Comments:**

**Signed** \_\_\_\_\_ **Date** \_\_\_\_\_

**GUIDELINES FOR  
TEACHER OF THE YEAR**

**1. Eligibility**

- a.** Nominations will be made by each district to recognize the Teacher of The Year for that district.
- b.** Each district nominee must be a member of the Georgia affiliate of AAFCS for a minimum of three years in Georgia.
- c.** Individuals, at the time the nomination form is submitted to GAFCS, must be employed as a permanent family and consumer sciences teacher in grades Kindergarten through 12.
- d.** Recipients are eligible to receive this award more than once. The Award may be given a second time to an individual; for outstanding contributions as an educator that are different from those for which the first award was given.

**2. Judging**

Applications will be judged by a committee of three GAFCS members. This committee will be appointed by the Vice President for Awards and Recognition and will have at least one member who is not a teacher. Judging criteria includes:

- a.** educational program is sustainable and can be replicated (25)
- b.** exhibited creativity and innovation in the program (20)
- c.** influenced the lives of students beyond the program (15)
- d.** identified and achieved specific goals through this program (15)
- e.** increased visibility of profession in the community (10)
- f.** received positive feedback from students, their families, and the community (10)

Appendix C (Guidelines for Awards and Scholarships) to the GAFCS Handbook

- g. been supported by colleagues and administrators (5)

**(Total points 100)**

**3. Timetable**

- a. Fall of the year: Districts nominate a Teacher of the Year
- b. December 1: Districts send the nomination for Teacher of the Year to the Elementary, Secondary and Adult Professional Section Chair
- c. December 30: ESAE chair mails nomination form to nominees
- d. March 1: Nominees send completed nomination form to ESAE chair
- e. March 15: ESAE chair submits applications to committee for selection
- f. At Annual Meeting: Georgia Teacher of the Year recognized
- g. January 15: Georgia TOY submits Teacher of the Year Award Nomination Form to AAFCS

**Georgia Association of Family and Consumer Sciences  
Teacher of the Year Award  
NOMINATION FORM**

Please provide the information below in chronological order using headings provided.

1. Nominee's name
2. Home address
3. Telephone: Home, School, fax and email
4. AAFCS membership number
5. Length of AAFCS membership
6. Name of school
7. School address
8. Position/Title
9. Grade(s) taught
10. Title of nominee's program
11. Program Area Focus—list only one
12. Identify college/universities the nominee has attended using the following format (list most recent first)

Degree	Major	Institution	Date Received
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13. Identify professional experience using the following format. (List most recent first)

Position	Employer	Dates	Function/Responsibility
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Appendix C (Guidelines for Awards and Scholarships) to the GAFCS Handbook

14. Professional/Honorary Activities and Affiliations

Organization	Years Membership	Positions held/Honors Received	Dates
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15. Was this program created by the nominee?

16. How long has it been implemented by the nominee?

17. State the primary focus of the program and identify the areas it was designed to address. Highlight ways in which the goals have been and are being accomplished. **A maximum of**

**ten (10) typed, double-spaced lines can be submitted in response.**

18. Answer Sections “a,” “b,” and “c.” A narrative response is required. **A maximum of two (2) typed, double-spaced pages can be submitted in response to each Section.** Be sure to address each of the narrative responses.

Section a. Explain how the nominee has contributed to the profession and the community through involvement in:

- Professional development initiatives
- Professional and honorary organizations and affiliations
- Community service
- Extracurricular activities

Section b. Provide the following background information.

- Community demographics such as urban, rural, ethnicity and level of involvement in school activities
- School setting including: Goals and philosophy; school and Family & consumer Sciences enrollment; and types of extracurricular activities offered.
- Program restrictions because of federal or state regulations and/or school policy such as enrollment and class size
- Program budget and funding

Section c. Identify the goals and objectives of the nominee’s educational program. Include only the information about the program for which the nominee is being nominated.

19. Describe the nominee’s education program. **A maximum of 16 typed, double spaced pages can be submitted for this response.** Photographs may be used to help illustrate and explain the program, but must be counted as part of the 14 pages. Please use the listed criteria as headings in the narrative response. Within the response, provide information on or give evidence of the following:

- A. Attainment of the program objectives
- B. Enrollment data and sustainability
- C. Impact of the program beyond the classroom
- D. Creativity and innovation
- E. Methods of stimulating student growth and involvement
- F. Integration of Family & Consumer Sciences Concepts
- G. Student accomplishments and productivity
- H. Progressive approach to the subject matter

Appendix C (Guidelines for Awards and Scholarships) to the GAFCS Handbook

20. Provide one (1) letter of support which provides evidence of the impact and importance of the nominee’s contributions to student, families, and the community such as those from supervisors, colleagues, parents, students and community leader.

Nominated by (may be self nomination)\_\_\_\_\_

District Teacher of the Year Award Chair or District Chair

Name\_\_\_\_\_

Address\_\_\_\_\_

\_\_\_\_\_

Home Phone\_\_\_\_\_Work Phone\_\_\_\_\_

Cell Phone\_\_\_\_\_Fax\_\_\_\_\_Email\_\_\_\_\_

Signature of District Chair or  
VP for Awards and Recognition\_\_\_\_\_

Signature of Nominee\_\_\_\_\_

Georgia Teacher of the Year Award  
Candidate Evaluation Form

Nominee\_\_\_\_\_ District/School\_\_\_\_\_

The nominee has:

1. Shown that the educational program is sustainable and can be replicated \_\_\_\_\_  
25 points
2. Exhibited creativity and innovation in the program \_\_\_\_\_  
20 points
3. Influenced the lives of students beyond the program \_\_\_\_\_  
15 points
4. Identified and achieved specific goal through this program \_\_\_\_\_  
15 points
5. Increased visibility of profession in the community \_\_\_\_\_  
10 points
6. Received positive feedback from students, their families, and the community \_\_\_\_\_  
10 points

Appendix C (Guidelines for Awards and Scholarships) to the GAFCS Handbook

7. Been supported by colleagues or administrators

\_\_\_\_\_   
 5 points

TOTAL SCORE \_\_\_\_\_

Evaluator's name \_\_\_\_\_

Date \_\_\_\_\_

Return this form to VP for Awards and Recognition.

GEORGIA ASSOCIATION OF FAMILY & CONSUMER SCIENCES  
General Nomination Form

Date \_\_\_\_\_ For GAFCS Year \_\_\_\_\_

For AAFCS Year \_\_\_\_\_

Person/Group Nominating \_\_\_\_\_

Address \_\_\_\_\_

Work phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

**Complete the information on the persons you wish to nominate for one or more of the following awards. Mail/email to Vice President for Awards and Recognition.**

Deadline for nominations \_\_\_\_\_

**AAFCS First Timer Scholarship**

Name \_\_\_\_\_

Appendix C (Guidelines for Awards and Scholarships) to the GAFCS Handbook

Address \_\_\_\_\_

\_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

**GAFCS First Timer Scholarship**

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

**GAFCS Pre-Professional/Graduate Student First Timer Scholarship**

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

**GAFCS Undergraduate Student Member Scholarship**

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

**GAFCS Graduate Scholarship**

Appendix C (Guidelines for Awards and Scholarships) to the GAFCS Handbook

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

**Julius Benton Professional Improvement Award**

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

**Outstanding Program of Work Of the Year**

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

**AAFCS New Achiever Award Nominee**

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

**AAFCS Leader Award Nominee**

Appendix C (Guidelines for Awards and Scholarships) to the GAFCS Handbook

Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

**AAFCS Wiley-Berger Award for Voluntary Service Nominee**

Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

**GAFCS Outstanding Family & Consumer Sciences professional**

Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

**GAFCS/AAFCS Teacher of the year Award**

Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

## Appendix C (Guidelines for Awards and Scholarships) to the GAFCS Handbook