

CALIFORNIA AGRICULTURAL TEACHERS' ASSOCIATION

Award Application Signature Page

(NAAE Recognized Awards Only)

Name of Applicant: _____

School: _____ Region: _____

Check the appropriate award category:

Outstanding Young Teacher

Outstanding Agriculture Education Teacher (Don Wilson Memorial Award)

Outstanding Teacher Mentor

Outstanding Agriculture Program Award – Middle/Secondary

Outstanding Agriculture Program Award – Post-Secondary

Ideas Unlimited

By signing this form, I acknowledge that the information in this application is true. If selected as the state winner, I agree to attend the entire National Association of Agricultural Educators (NAAE) Conference.

Applicant's Signature

Date

If the applicant is selected as the state winner, I understand that the applicant will be expected to attend the entire National Association of Agricultural Educators (NAAE) Conference. I support this application and will permit the teacher(s) to attend the entire NAAE Conference if selected as the state winner.

Administrator's Signature

Date

Printed Name

Job Title