# EDUCATORS' HALL OF FAME

Be sure to keep the original nomination form for your records. Please forward to us a high quality copy so that it will be received no later than Friday, June 9, 2023.

Ventura County Educators' Hall of Fame C/O Selection Committee P.O. Box 883 Somis, CA. 93066 **IMPORTANT:** Please keep your original nomination form and supporting documents for your records. We would kindly ask that you send us a high-quality copy of your nomination submission. Thank you!

\*Due Date: Friday, June 9, 2023

# Section I - Nominee Information (please print)

Name of Nominee:					
Date of Birth:			Date of Death:		
Address:			_ City:		
<b>State:</b>	Zip Code:	Email:			
Home Phone:		Cell Phone	<b>:</b>		
Name of Spouse:					
Children:					
<b>Total Years of Educati</b>	ion:Yea	rs in Ventura Co	unty Education:		
<b>Last School Year Serv</b>	ed Prior to Retire	ement:			
District  1  2  3  4	<u>School</u>	<u>ol</u>	ed within Ventura Cou	<u>Dates</u>	
Nominee categories: I	Please check the a	ppropriate boxes	S		
	-		l		
	unity College / Un	·			
Position:   Teache	r/Instructor / Pro	fessor	dministrator		
☐ Suppor	t Employee C	<b>Other</b>		<u> </u>	



# Section II - Educational/Civic Honors, Recognition and Community Service

As a separate attachment, please list any honors, awards, special recognition and community service, including approximate dates (if possible) - this may also be done on a separate page. Please include a photo copy of the certificate or honor if at all possible.

## **Section III - Statement in Support of Nominee**

As a separate attachment, please elaborate on the basis for this nomination. Pay particular attention to achievements, accomplishments and honors in education; extraordinary and/or significant contributions to education; special recognition. This narrative should not exceed 600 words.

### **Section IV - Additional Letters of Support**

**Nominator Signature:** 

As nominator, you may include statements in support of your nomination from a maximum of 5 additional persons. Statements are limited to 300 words and must include: a) the name of the person submitting the statement; b) phone number and; c) their relationship to the nominee.

Date of Birth:			Date of Death:	
<b>State:</b>	Zip Code:	Email: _		
<b>Daytime Phon</b>	e:	Cell Pho	ne:	
Your relationship to	nominee: (Please check a	ppropriate box)		
☐ Colleague	☐ Former Student	☐ Parent	Administrator / Su	pervisor
☐ Community L	eader Other			
Please include three	nces e additional sources who e for induction into the Ve		·	ding the
nominee's eligibility Name:	e additional sources who we for induction into the Ve	entura County E Relationship	ducators' Hall of Fame.	
Please include three nominee's eligibility Name:Address:	e additional sources who we for induction into the Ve	entura County E Relationship City:	ducators' Hall of Fame. : State:	Zip: _
Please include three nominee's eligibility Name: Address: Email Address:	e additional sources who we for induction into the Ve	entura County E Relationship City: Phone:	ducators' Hall of Fame. : State:	Zip: _
Please include three nominee's eligibility Name: Address: Email Address: Name:	e additional sources who we for induction into the Ve	entura County E  Relationship City: Phone: Relationship	ducators' Hall of Fame. : State:	Zip: _
Please include three nominee's eligibility Name: Address: Email Address: Name: Address:	e additional sources who we for induction into the Ve	entura County E Relationship City: Phone: Relationship City:	ducators' Hall of Fame. : State: : State:	Zip:
Please include three nominee's eligibility Name: Address: Email Address: Name: Address:	e additional sources who we for induction into the Ve	entura County E Relationship City: Phone: Relationship City: Phone:	ducators' Hall of Fame. : State: : State:	Zip:
Please include three nominee's eligibility Name: Address: Email Address: Name: Address: Email Address:	e additional sources who	entura County E  Relationship City: Phone: Relationship City: Phone: Relationship	ducators' Hall of Fame. : State: : State:	Zip: _ Zip: _