

APPLICATION FOR PSAHPERD TEACHER OF THE YEAR 2007

Elementary, Middle, High School and University Levels

DUE JULY 1, 2007

Email completed application to (email is preferred):

matt_trout@cvsd.k12.pa.us

or mail to:

Matt Trout

1007 Woodridge Blvd.

Lancaster, PA 17601

This packet contains the following information about the PSAHPERD Teacher of the Year (TOY) award program:

1. General background
 2. Eligibility requirements
 3. Award criteria
 4. Teaching levels
 5. Selection and recognition process
 6. Directions for completing application
 7. Official application form
 8. Publicity form
- All dates provided within the application packet refer to the academic year in which application is being made. The process culminates each year at the PSAHPERD Annual Convention
 - This form may be duplicated or found on line at the PSAHPERD web site (www.psahperd.org).

**Pennsylvania State Association for HPERD (PSAHPERD)
TEACHER OF THE YEAR PROGRAM**

Background

PSAHPERD recognizes the work of outstanding physical education teachers at the state level. The current program honors teachers at four levels: elementary, middle school, high school, and University. PSAHPERD award winners at the elementary, middle school, and high school levels will be eligible and (along with further information and documentation) become Pennsylvania's nominees to be considered for TOY at the Eastern District level and the AAHPERD (national) level. EDA does recognize each state level winner and then selects an EDA candidate to move on to the AAHPHERD national TOY.

Eligibility Requirements

A "physical educator" is an individual whose primary teaching responsibility is in one or more grades K-12 of a specific school or school district.

"Physical educators" who meet the eligibility requirements and exemplify the criteria for this award, may apply or be nominated by a colleague.

Eligibility requirements include:

1. Current membership in PSAHPERD, and in order to be considered for EDA or AAHPERD awards you will need a NASPE/AAHPERD membership;
2. Degree in and certification as a physical education teacher;
3. Minimum of five years teaching experience in physical education;
4. Full-time teaching contract, current at the time of nomination and selection;
5. Minimum 60% of total teaching responsibility is physical education.

Please Note: Current members of COPEC or MASSPEC Executive Committees; former district or national NASPE Teachers of the Year at the district or national level; and recipients of NASPE Teacher of the Year awards at the state level within the last three years are not eligible to apply for this award.

Levels

Teachers may have responsibility for teaching grades that cross the different levels, but applications can be submitted for one level only. Teachers should apply for the level that represents 50% or more of their physical education teaching assignment.

Elementary - Kindergarten through Sixth Grade

Middle School - Sixth Grade through Eighth Grade

High School - Ninth Grade through Twelfth Grade

University – Post Secondary with primary responsibility in Physical Education Teacher Education

Award Criteria

The applicant must be a teacher who:

1. Conducts a quality physical education program as reflected in NASPE standards and guidelines for K-12 Physical Education programs;
2. Utilizes various teaching methodologies and plans innovative learning experiences to meet the needs of all students;
3. Serves as a positive role model epitomizing personal health and fitness, enjoyment of activity, sportsmanship, and sensitivity to the needs of students;
4. Participates in professional development opportunities;
5. Provides service to the profession through leadership, presentations, and/or writing.

Applicants must address each of the criteria (1-5) as it applies to their teaching situation. Each answer must not exceed one 8-1/2 x 11, single spaced, one-inch margin page, in 12-point font.

Application Directions

Application and publicity forms must:

1. Be filled out completely and be typed using 12 point font;
2. Be submitted to the chair of the TOY Committee, Matt Trout, by July 1, 2005

Two letters of recommendation **must** be included (see page 7). The letters should be one to two pages in length with content directly related to the award criteria. One letter must be from the current principal; additional letters may be from colleagues or parents or others who are familiar with the work of the applicant.

State and District Selection and Recognition Process

If you are **chosen** as a PSAHPERD Teacher of the Year (TOY) & wish to be considered for the district (i.e., EDA) and national level (i.e., AAHPERD/NASPE) TOY award you must submit a completed **NASPE** application and publicity forms to the **PSAHPERD president or appropriate state designee by October 15 (the year following you're awarded the PSAHPERD TOY award).**

State selection committees may select one State Teacher of the Year for each of the three NASPE levels and forward the recipient names and applications and publicity forms to **NASPE TOY Program, 1900 Association Drive, Reston, VA 20191** by **November 8**. NASPE will review all State winners' applications and publicity forms and send the packets of materials to the **district presidents or appropriate district designees by November 15**.

District selection committees will select one District Teacher of the Year for each of the three NASPE levels and forward the recipients' names and applications to the **NASPE TOY Program, 1900 Association Dr., Reston, VA, 20191-1599, no later than January 15 of the next award year. **THIS DATE IS FINAL** (to provide time for District winners to plan for convention).**

**PSAHPERD TEACHER OF THE YEAR
OFFICIAL APPLICATION FORM
2007**

Detach the application and publication forms from the rest of the packet and return them along with your responses to the award criteria and letters of recommendation to the chair of the PSAHPERD Physical Education TOY Committee, Matt Trout.

Level: ___ Elementary (K-6)
 ___ Middle School (6-8)
 ___ Secondary (9-12)
 ___ University (Post Secondary)

Applicant's Name: _____

Name You Wished to be Called

Name to Use in Writing (certificates, press releases, etc)

Home Address: _____

City/State/Zip:

Home Phone: _____ Email address: _____

Present Position/Title: _____

School

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Educational Information:

College/University

Major

Bachelors Degree

Masters Degree

Doctoral/Prof. Degree

Career Information:

Position

Location

Length of Service

Please list duties involved with positions:

Professional Affiliations:

NASPE/AAHPERD Membership # _____

Expiration Date _____

Years of Membership ____

NASPE Activities (offices, articles, etc.)

District AHPERD:

District Offices/Division or Project Activities:

Pennsylvania AHPERD Membership # _____

Expiration date: _____

Years of Membership ____

State Offices/Division or Project Activities:

Other Professional Affiliations:

Significant Achievements in the Field of Physical Education:

Community Service:
(Type and dates)

Complete SEPARATE SHEETS, ONE (MAXIMUM) FOR EACH OF THE FIVE AWARD CRITERIA LISTED ON PAGE 7 OF THIS PACKET. THE APPLICANT SHOULD OUTLINE QUALIFICATIONS RELEVANT TO THAT SPECIFIC CRITERION. MAJOR CONSIDERATION FOR THE AWARD WILL BE BASED ON THESE CRITERIA.

YOUR TWO LETTERS OF RECOMMENDATION MUST BE INCLUDED WITH THE APPLICATION. THOSE LETTERS SHOULD BE DIRECTLY RELATED TO THE AWARD CRITERIA LISTED BELOW.

CRITERIA 1: CONDUCTS A QUALITY PHYSICAL EDUCATION PROGRAM AS REFLECTED IN NASPE STANDARDS AND GUIDELINES FOR K-12 PHYSICAL EDUCATION PROGRAMS.

CRITERIA 2: UTILIZES VARIOUS TEACHING METHODOLOGIES AND PLANS INNOVATIVE LEARNING EXPERIENCES TO MEET THE NEEDS OF ALL STUDENTS.

CRITERIA 3: SERVES AS A POSITIVE ROLE MODEL EPITOMIZING PERSONAL HEALTH AND FITNESS, ENJOYMENT OF ACTIVITY, SPORTSMANSHIP, AND SENSITIVITY TO THE NEEDS OF STUDENTS.

CRITERIA 4: PARTICIPATES IN PROFESSIONAL DEVELOPMENT OPPORTUNITIES.

CRITERIA 5: PROVIDES SERVICE TO THE PROFESSION THROUGH LEADERSHIP, PRESENTATIONS, AND/OR WRITING.

2007 PSAHPERD TEACHER OF THE YEAR PUBLICITY FORM

State _____ AAHPERD District _____

Applicant's Full Name _____

Applicant's Address: _____

School District Information:

Superintendent's Name _____

Principal's Name _____

Program/Dept. Chair's Name and Title _____

School District Administration Address and Phone _____

School District Public Relations Officer (Name, Address, phone number) _____

Newspapers: - List the local papers with the largest circulation.

Newspaper _____ Editor _____

Address _____

Phone and Fax _____

Newspaper _____ Editor _____

Address _____

Phone and Fax _____

Television Station: - List the local stations with the broadest coverage (use back of sheet if there is more than one).

Station Name/Call Letters _____ Contact Person _____

Address _____

Phone and Fax _____

Government Officials:

State Legislator _____

Address _____

U.S. Congress Rep. _____

Address _____

U.S. Senator _____

Address _____

U.S. Senator _____

Address _____

Others - List others, including titles and addresses, to whom your progress in this program should be reported.

Use the back of this sheet if necessary.