

## **Nomination for Leadership**

Student Name	Grade	School						
Teacher Name	Birth Date							
Parent/Guardians Name								
Name of Nominator								
Nominator's Relationship to Student								
Nominator Contact Information								
Primary Phone #	Parent/Guardian Phone #	Parent/Guardian Phone #						
	Parent/Guardian Work #1	Parent/Guardian Work #2						
Email(s)								

Continue on the back for any questions if needed

1.	. In what area/areas	does the student	display excep	tional leadersh	ip? Please	give an	example
fc	or each area.						

- 2. Please share a brief account of the student's attitude towards their leadership?
- 3. What are the student's learning needs as you see them?
- 4. Please list the activities in which the student shows creativity.
- 5. The school district has a team of personnel with the skills to develop effective programming to meet the student's educational needs. Please list any school district personnel you have talked with in the past year regarding the student's abilities and needs.