



## **Minnesota Technology and Engineering Educators Association AWARDS PROGRAM**

This nomination can also be completed on-line at <https://www.mteea.net/index.php/awards/retirement-service>

### **Retirement Service Award Nomination Form**

This award will be presented to recognize outstanding Technology Education and Engineering Educators who have retired from teaching Technology Education in Minnesota.

#### **REQUIREMENTS:**

1. Nominees must have retired from teaching by the time that they receive the award.
2. The nominee must have been a member of MTEEA for at least 5 years. The years of MTEEA membership do not have to be consecutive.
3. The nominee must be a current member of MTEEA.

#### **SCHEDULE:**

1. Individuals or area affiliates may nominate instructors who meet the requirements.
2. Nomination forms can be submitted to the Awards Chairperson anytime from **October 15th through May 15th**.
3. The Awards Chairperson must receive the completed Retirement Service Award Nomination form and a digital photograph by **May 15th** to be considered.
4. The Awards Chairperson will verify information and notify the nominee about their status by **June 1st**.
5. The Awards Chairperson will notify the recipient about their award and about attending the Awards Banquet by **September 5th**.
6. A MTEEA Retirement pin will be presented to recipients at the Annual MTEEA Fall Conference. The recipients will receive up to two tickets for the Awards Banquet if they attend.

**Minnesota Technology and Engineering Educators Association  
Retirement Service Award Nomination Form**

Date: \_\_\_\_\_

Check one: \_\_\_\_\_ Senior High School  
 \_\_\_\_\_ Junior High/Middle School  
 \_\_\_\_\_ Elementary School

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State/Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) - \_\_\_\_\_

School Phone: (\_\_\_\_) - \_\_\_\_\_

Email: \_\_\_\_\_

**Teaching Experience**

Total years teaching \_\_\_\_\_

Years	School	Subject & Grade Level
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Education: Technical Schools, Colleges, Universities, Etc.**

School	Degree	Year
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Local, State and National Affiliation Membership**

MTEEA Affiliate Membership: \_\_\_\_ (years) Current Affiliate Name: \_\_\_\_\_

Current MTEEA Membership: \_\_\_\_ Yes \_\_\_\_ (years) No \_\_\_\_\_

Current ITEEA Membership: \_\_\_\_ Yes \_\_\_\_ (years) No \_\_\_\_\_

**Other Professional Organizations**

Name of Organization	Offices Held
_____	_____
_____	_____
_____	_____

**NOTE:** Please make a copy of all your materials before sending this nomination form to the MTEEA Awards Chairperson. The Awards Chairperson can be located on the MTEEA Website: [www.mteea.net](http://www.mteea.net)