



Sample Nomination Form
2024 Imogene Maxon Early Educator Award

Please submit this information online between January 9-31, 2024.

NOMINATOR CONTACT INFORMATION

First Name:

Last Name:

Role/Title:

Email Address:

NOMINEE DETAILS

First Name:

Last Name:

Role/Title:

Email Address:

School where nominee is employed:

How many years of experience as an educator does the nominee have?

How many years of the above experience is with the Boulder Valley School District?

Is the nominee on a regular (not temporary) contract with the school district?

- ☐ Yes
- ☐ No
- ☐ Unknown



SHARE WHY YOU ARE NOMINATING THIS EDUCATOR

What ONE WORD would you use to describe this educator?

Describe the educator's impact in the classroom with students.

How would this educator's students describe them?

How is this educator involved outside the classroom (e.g. mentoring, department responsibilities, committees, extracurricular activities, etc.)

What voluntary professional development or continued learning has this educator completed?



How does this educator address student barriers to equal opportunity and equity in BVSD?

How does this educator reflect the mission of Boulder Valley School District?

Is there anything else you'd like us to know?

VERIFICATION

☐ **This nominee is a current affiliate of BVSD**