



**BROWARD COUNTY PUBLIC SCHOOLS
SCHOOL-RELATED EMPLOYEE OF THE YEAR**

APPLICATION FORM

(NOMINEE MUST COMPLETE THIS FORM. TYPE ALL INFORMATION.)

TITLE MR MRS MS DR

NAME _____

HOME ADDRESS _____

CITY _____ ZIP CODE _____

HOME PHONE _____ CELL PHONE _____

TWITTER HANDLE _____

PERSONAL EMAIL _____

WORK EMAIL _____

JOB TITLE _____

NAME OF SCHOOL/WORK SITE _____

SCHOOL/WORK SITE ADDRESS _____

CITY _____ ZIP CODE _____

SCHOOL/WORK PHONE _____ SCHOOL/WORK FAX _____

NAME OF PRINCIPAL OR DISTRICT SUPERVISOR _____

BRIEF DESCRIPTION OF CURRENT JOB RESPONSIBILITIES

TOTAL YEARS WORKING FOR THE DISTRICT _____

TOTAL YEARS AT CURRENT WORK SITE _____

**Deadline for submitting application packet to principal, District-based executive director
or director is Friday, October 15, 2021.**

For more information, visit browardschools.com/caliber-awards.