



Wayne Parker Advocate of the Year Award Nomination Form

Date Submitted: _____

This award is given each year to a person who has exemplified using information to assist their own child or someone else's child with a disability to receive a free appropriate public education. STEP seeks recipients who demonstrate teamwork and collaboration and the zeal to share the information they have learned with others. Nominees may be a parent of a child with a disability, an advocate that works with families, a teacher who has been exemplary in the life of a student with a disability, or a service provider who has bridged the gap for a student or their family to assist in receiving a free appropriate public education.

All nominees will be considered and the recipient chosen to receive the award will be contacted for further information.

Name of Nominee: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

County: _____ **Phone:** _____

Email: _____

Please check one: Parent Professional

Role in the Student's Life: _____
(Example: parent, caregiver, advocate, teacher, service provider, etc.)

Short essay describing why this nominee is deserving of the recognition. ***Please Note:** Do not give confidential information about the student unless permission has been given from nominee. Use broad terms such as: has a young child, middle school age child, etc., from East, Middle, or West TN.)*

Include a photo of the nominee (jpg format).

Nominated by: Name: _____

Address: _____

Phone: _____

Email: _____

Office Use Only:

Date received: _____

<https://www.surveymonkey.com/r/WPAdvocateForm>

