

**Guidelines for the
Maine Education Association**

JOAN MCGOVERN ESP AWARD

PURPOSE:

To emphasize outstanding accomplishments and reflect the contributions of Education Support Professionals to public education.

CRITERIA FOR SELECTION:

The individual must have been an MEA/NEA member for three years as of December 31 of the award year. The individual must also be an MEA Education Support Professional (ESP) member who shows outstanding accomplishments.

Individuals will be judged according to the criteria listed on the nomination form.

PROCEDURE:

The nomination form must be received by the MEA President by **March 7, 2019**. Each nomination form must be signed by an MEA member. It is the responsibility of the person making the nomination to contact the nominee and ascertain his/her willingness to accept the nomination and award and prepare the contents of the nomination.

FINAL SELECTION:

Whenever the number of award nominations exceeds five, a screening committee shall be established to review the nominations. The committee, appointed by the MEA President, shall include a past recipient, a member not in a leadership position, a Board of Directors member, and the MEA President or designee. The names of five nominees will be sent to the Board of Directors for final selection.

Award recipients will be notified through the office of the MEA President. (In any given year, this award may not be presented.)

PRESENTATION:

Announcement of the recipient of the Joan McGovern ESP Award will be made at the MEA Representative Assembly. The winner will be nominated for the NEA ESP Award the following academic year and will represent Maine at the NEA ESP Conference. Each year, one nominee receives the NEA ESP of the Year Award, which includes \$10,000 cash prize from NEA Member Benefits. The winner will also be invited to address that year's NEA Representative Assembly, attend the following year's NEA ESP Conference, and is appointed to the following year's NEA ESP of the Year selection committee with expenses paid for by NEA.

Maine Education Association
JOAN MCGOVERN ESP AWARD

NOMINATION FORM

Deadline: March 7, 2019

NAME OF NOMINEE _____

LOCAL ASSOCIATION _____

HOME ADDRESS _____

HOME PHONE: _____ **WORK PHONE:** _____

E-MAIL ADDRESS: _____

CONTENTS OF NOMINATION: Nomination packages must include all of the materials listed below, in the specified order.

A. DATA SHEET

Limit to one page maximum, at least twelve-point type. Handwritten data sheets are not accepted. The Data Sheet should be marked Page 1 of your packet, and the rest numbered consecutively.

Requests contact information for the state, federal, or direct affiliate, the nominee, and the nominee's local affiliate.

B. NOMINATION LETTER

Limit to two pages maximum, double-spaced, at least twelve-point type, and one inch margins on all sides. Must be on state, federal, or local affiliate letterhead and signed by the affiliate president.

Give specific examples of achievement in each of the five criteria areas: professional practice; member advocacy and association involvement; community engagement; personal achievement; enhancement of ESP image.

C. NOMINEE'S STATEMENT

Limit to five pages maximum, double-spaced; at least twelve point type, one-inch margins on all sides.

Addresses the five award criteria outlined below, citing as many specific examples as possible. Answer all questions.

1. **Professional Practice:** Describe the worksite responsibilities and professional achievements the nominee has made in his/her field. How has the nominee demonstrated leadership, creativity, and innovation in making a difference for students and the school or workplace?
2. **Member Advocacy and Association Involvement:** In what ways does the nominee show evidence of leadership, creativity and innovation as an advocate for members, for the profession, and for public education? How has the nominee's involvement in the National Education Association or NEA affiliate(s) contributed to his/her success as a professional? How would the nominee recruit and encourage colleague to be more involved with the Association?

Submission Instructions:

1. Number the pages of the entire package consecutively, starting with the Data Sheet (Part A) as Page 1.
2. Do **not** staple or permanently bind the materials. Paper clips are acceptable.
3. Do **not** use covers or other decorative packaging.
4. Include **only** the materials requested in these guidelines.
5. The complete nomination package must be received at the Maine Education Association.

Send your nomination package to:

**MEA President
Maine Education Association
35 Community Drive
Augusta, ME 04330**

Questions? Call 1-888-622-4418, extension 2218 or visit maineea.org/contact-us/

Checklist:

_____A.	DATA SHEET	1 page
_____B.	Nomination Letter	5 pages max.
_____C.	RÉSUMÉ	1 page max.
_____D.	NOMINEE'S STATEMENT	2 pages max.
_____E.	LETTERS OF RECOMMENDATION	6 pages max. (3 letters, 2 pages each)
_____F.	PROMOTIONAL PHOTO	1 high quality digital headshot
	TOTAL	15 pages max.

**EA ESP of the Year Award
DATA SHEET**

You must use this form to provide nominee and affiliate information.

Type of Nomination (Please check one)

- State Affiliate Nominee
 Local Affiliate Nominee (*Only permitted if there is no State ESP of the Year Program*)

NOMINEE INFORMATION

Nominee: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Mobile Phone: _____ Alternate Phone: _____

E-mail: _____

Job Title: _____

NEA Career Family (check all that apply)

**Descriptions can be found at www.nea.org/assets/docs/WhoWeAreESP.pdf*

- | | | |
|---------------------------|-----------------------------|-----------------------------|
| ___ Clerical Services | ___ Health/Student Services | ___ Skilled Trades |
| ___ Custodial/Maintenance | ___ Paraeducators/Ed Techs | ___ Technical Services |
| ___ Food Services | ___ Security Services | ___ Transportation Services |

School/Worksite: _____ District/University: _____

Work Address: _____

City: _____ State: _____ Zip Code: _____

Work Phone: _____ Work E-mail: _____

Number of Years as NEA Member _____

STATE AFFILIATE NAME

LOCAL AFFILIATE NAME
