

WIABE Annual (2012) Bilingual/Bicultural Educator of the Year Award

The WIABE 2012 EDUCATOR OF THE YEAR AWARD will be presented to one educator in any Bilingual/Bicultural School or School District in Wisconsin. As you consider the recommendation of a Bilingual/Bicultural educator, please adhere to the following criteria, one educator per school:

1. The educator must have serviced English Language Learners for 5 years.
2. The educator must hold a valid license from the Department of Public Instruction.
3. The educator must demonstrate exemplary skills in working with students.
4. The educator has continually evidenced self-motivation in seeking and engaging in professional growth activities related to English Language Learners.
5. The educator has continually made teaching and learning a priority for all children.

WIABE 2012 Educator of the Year Recognition Award

Based on the criteria above, I recommend the following candidate for the WIABE 2012 Educator of the Year Award.

Name of Educator: _____

Name of Person Recommending: _____ Title: _____

*Home Address: _____

Home Telephone Number: _____

School: _____ District: _____

***Please include the home address for mailing of personal invitation to honoree.**

I am recommending the above individual because: (50 words or less)

Please return to:

WIABE Educator Recognition Committee c/o Graciela de la Cruz, Chair, P. O. Box 340192 Milwaukee, WI 53234-0192 Or E-Mail to: gdelacruz3239@aol.com You may also fax your form to: Jesus Santos at 414-475-8188 Recommendation form is also available on the WIABE website @www.wiabe.org

All nomination forms must be received on or before **January 20, 2012**



Wisconsin Association for Bilingual Education (WIABE)

Registration Form
Educator of the year Awards & President's Receptions
When: March 23, 2012
Time: 7:00 p.m.
Where: Chula Vista

Additional Guest of the Educator of the Year Awards Friday's Event

Please fill this area if you are bringing a guest to Friday's event. A check payable to WIABE for the exact amount must be submitted with the registration form.

Waiting till the conference date does not guarantee your guest entrance to the event.

Educator of the year: Free

One Additional Guest: Free

Other Additional Guest @ \$10.00 X _____ = _____

Educator of the Year Name _____ FREE

1st Guest Name _____ FREE

Guest Name _____ \$10

Guest Name _____ \$10

Guest Name _____ \$10

Please return completed form with payment to Cynthia Mendoza at:

P. O. Box 340192
Milwaukee, Wisconsin 53234-0192
mendozca@milwaukee.k12.wi.us
Fax: (414) 475-8074

