

Special Ambassador Award



NOMINATION FORM

Nominations are due Wednesday, Dec. 6, 2017

The Special Ambassador Award is the highest recognition given by SSD. The award is presented to community members who demonstrate an extraordinary commitment to the students and/or staff of SSD. Special Ambassadors are recognized annually at the District's SSD Salutes Banquet on Thursday, March 8, 2018.

Please complete the entire form and return it to the Communications Department by e-mail to wbuchek@ssdmo.org; by mail (12110 Clayton Road, Town & Country, MO 63131); or by fax (314.989.8470). Contact Wes Buchek at 314.989.8102 with questions.

Special Ambassador Award Guidelines

- ◆ This award is open to an individual or group (e.g. organization, department, corporation, etc.). Ambassadors will be recognized in two separate categories - individual and group.
- ◆ SSD staff may be nominated for this award, but will only be considered if evidence clearly shows that their service to the District extends far beyond normal job duties.
- ◆ **When nominating a person for the individual award, nominators should only select one person per organization so there is not competition within an organization. Group awards can be presented to multiple representatives.**
- ◆ Individuals and groups can be nominated by SSD staff, parents, partner district staff or anyone in the community.
- ◆ A committee will select multiple individuals and groups to receive the award. Award winners will be honored at the District's SSD Salutes Banquet on March 8, 2018.

PART I - NOMINEE INFORMATION

Nominee Type (please check one): Individual Group

Individual Nominee Information (see page 2 for group nominee information)

Name (include titles e.g. Dr., Mr., Ms.): _____

Home Address (if known): _____

City: _____ State: _____ Zip: _____

E-mail: _____

Work Phone: _____

Employer: _____

Position: _____

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Group Nominee Information

Group Name: _____

Group Contact(s) (include titles e.g. Dr., Mr., Ms.): _____

Group Address: _____

City: _____ State: _____ Zip: _____

Group Contact E-mail: _____

Group Contact Phone: _____

PART II - NOMINATOR INFORMATION - Please no more than two nominators

Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____

Home Phone: _____ Work Phone: _____

Relationship with SSD: _____

School/Organization: _____ District (if applicable): _____

Position: _____

Nominator Signature: _____ Date: _____

By checking box, you verify all information is accurate.

How did you hear about this award?

- SSD website (www.ssdmo.org)
- SSD's Facebook page (www.facebook.com/SSDStLCo)
- Special Edition (district newsletter)
- SSD Unfiltered (district e-newsletter)
- From an SSD employee
- SSD Life (Intranet)
- Other (please specify): _____

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PART III - REASON FOR NOMINATION (Maximum Length - three pages total)

I. Briefly describe the nominee's background including professional experience and volunteer efforts.

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PART III - REASON FOR NOMINATION (continued)

2. *If applicable, list personal experiences, specific events or persons who may have influenced the nominee to provide service to SSD.*

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PART III - REASON FOR NOMINATION (continued)

3. *Describe specific examples of how the nominee demonstrates extraordinary commitment and dedication to students, staff and the SSD mission.*