



**Kansas SkillsUSA Administrator of the Year Nomination Form**

Name of Nominee: \_\_\_\_\_

School: \_\_\_\_\_

High School: \_\_\_\_\_ or College/Postsecondary: \_\_\_\_\_ or ATS: \_\_\_\_\_

Title: \_\_\_\_\_

Number of years as Administrator at current school/college/ATS: \_\_\_\_\_

Describe (briefly) this administrator’s support for SkillsUSA at above the school:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe (briefly) this administrator’s support for the instructors/advisors at the above school:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The following documentation must accompany this nomination:

1. A letter of support from the Lead School Advisor and/or other instructors.
2. A letter of support from a current or former student at the above school.
3. A letter of support from a community individual or business/industry advisory council member

***The completed form and the signed letters of support must be at the state office by March 1, 2018. Submit completed application to:***

SkillsUSA Kansas | 900 SW Jackson Street, Suite 653 | Topeka, KS 66612

***The SkillsUSA Foundation Board of Directors will select the 2018 SkillsUSA Kansas Administrators of the Year.***