



Kansas SkillsUSA Advisor of the Year Nomination Form

Name of Nominee: _____

School: _____

Middle School: _____ High School: _____ College/Postsecondary: _____

Number of years as teacher: _____

Number of years as SkillsUSA advisor: _____

Program/courses taught at above School: _____

Describe (briefly) this advisor’s contributions to SkillsUSA at the above named school:

Describe (briefly) this advisor’s contributions to the local community through SkillsUSA:

The following documentation must accompany this nomination:

1. A letter of support from the school’s administrator
2. A letter of support from a current or former student of this advisor
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. Submit completed application to:

SkillsUSA Kansas | 322 23,000 Road | Cherryvale, KS 67335 or email to bwarren@ksde.org

The SkillsUSA Foundation Board of Directors will select the SkillsUSA Kansas Advisors of the Year.